# L24000170103

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	1
(,,	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(,	
(Document Number)	
Certified Copies Certificates of	Status
Special Instructions to Filing Officer:	





600424615526

02/27/24--01007--017 \*+150.00

12021

## **Articles of Conversion**

For

#### "Other Business Entity"

Into

### Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

. The name of the "Other Business Entity" immediately prior to the filing of t	
(Enter Name of Other Business Entity)	
CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnersh	in common law or business trust etc
FLORIDA First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S.	entity, the name of the country)
12/13/2023 on	
(date of organization, formation or incorporation)	
. The name of the Florida Limited Liability Company as set forth in the attac	hed Articles of Organization:
<ol> <li>The name of the Florida Limited Liability Company as set forth in the attac</li> <li>MGC2 LLC</li> </ol>	hed Articles of Organization:
· · · · · ·	hed Articles of Organization:
MGC2 LLC	e than 90 calendar days after

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 20	day of February	20_24
Signature of Auth	orized Representative of Limi	ted Liability Company:
	orized Representative:	0
Signature of Author	onzed Representative:	7 1 MANAGING MEMBER
Printed Name: MAH	C G CANNON	Title: MANAGING MEMBER
· · · · · · · · · · · · · · · · · · ·	1 / / /	See below for required signature(s)]
Signature:	il_	
Printed Name: MAR	C G CANNON	Title: INCORPORATOR
Signature:		
Printed Name:		Title:
Timed Name.		
Signature:		
Printed Name:	<u> </u>	Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:	<del>-</del>	Title:
Signature:		
Printed Name:	· ·	Title:
Timted traine		
<u>If Florida Corpora</u>		
_	nan, Vice Chairman, Director, or	
If Directors or Office	ers have not been selected, an In	corporator must sign.
If Florida General	Partnership or Limited Liabili	ty Partnerchin
Signature of one Ge		<u> </u>
_		
	Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u>	General Partners.	
All others:		
Signature of an auth	norized person.	
Fees:		
	_	
	Conversion:	\$25.00
	orida Articles of Organization:	\$125.00
Certified C		\$30.00 (Optional)
Certificate	of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MGC2 LLC			
(	Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	Address:		
The mailing add	ress and street address of th	e principal office of the Limited Liability Con	npany is:
Principal Office	Address:	Mailing Address:	
555 5TH AVE NE		555 5TH AVE NE	
STE 824		STE 824	
ST PETERSBUR	G, FL 33701	ST PETERSBURG, FL 33701	
The name and th	e Florida street address of t	he registered agent are:	
The name and th	MARC G CANNON	he registered agent are:	
The name and th	MARC G CANNON	ame	
The name and th	MARC G CANNON N 555 5TH AVE NE STE 82	ame	
The name and th	MARC G CANNON N 555 5TH AVE NE STE 82	ame  4 P.O. Box <u>NOT</u> acceptable)	
The name and th	MARC G CANNON  N  555 5TH AVE NE STE 82  Florida street address (	ame 4	

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	
"AMBR" = Authorized Member	
"MGR" = Manager	MARC G CANNON
MGR	555 5TH AVE NE STE 824
	ST PETERSBURG, FL 33701
	31 FETENSBUNG, FL 33701
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	•
REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	e with section 605.0203 (1) (b). Florida Statutes. I am aware t
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware the to the Department of State constitutes a third degree fellowers.
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b). Florida Statutes. I am aware t
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document is provided for in s.817.155, F.S.  MARC G CANNON	e with section 605.0203 (1) (b). Florida Statutes. I am aware to the Department of State constitutes a third degree fellowers.
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document is provided for in s.817.155, F.S.  MARC G CANNON	e with section 605.0203 (1) (b). Florida Statutes. I am aware t