# L24000197075

(Requestor's Name)		
(Address)		
(Address)		
- (Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to f	Filing Officer:	
, , , , , , , , , , , , , , , , , , , ,		





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03/12/24--010**3**3--010 \*\*155.00

2024 HAR 12 PM 4: 38

T. MATTHEWS MAY - 2 2024





April 2, 2024

CECELIA J. YOPP 5398 SW 116TH PL OCALA, FL 34476 US

SUBJECT: BRANDONWILL ENTERPRISES, LLC

Ref. Number: W24000052772

We have received your document for BRANDONWILL ENTERPRISES, LLC and check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tekayla T Matthews Regulatory Specialist II

Letter Number: 024A00007063

### **COVER LETTER**

TO:	New Filing S Division of C					
CHDI		will Enterprises, LLC				
SUBJ	EC1:		ulting	g Florida Limit	ed Cor	npany)
The en Busin	nclosed Article ess Entity" into	s of Conversion, Artic a "Florida Limited Li	les o abili	f Organizati ty Company	on, ar " in a	nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	return all corr	espondence concernin	g this	s matter to:		
Ceceli	a J. Yopp					
		(Contact Person)	-			
Brando	onwill Enterpris <b>s</b>	S				
		(Firm/Company)		· <del></del> -		
5398 9	SW 116th PL					
		(Address)				
Ocala	FL 34476	,				
———		77. 6. 17. 6.1				
branda		City, State and Zip Code)				
	onwillenterprises					
t-m	iaii Address: (to b	e used for future annual re	ort no	otifications)		
For fu	rther informati	on concerning this ma	ter, j	olease call:		
Cecelia	а Үорр			813	.324-4	1474
	(Name of Conta	ct Person)	_at (		(Day	time Telephone Number)
Enclos dollars	sed is a check f and drawn on	or the following amou a bank located in the I	nt: ( <i>A</i> Jnite	All checks p		sed by this office must be payable in US
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	\$155.00 Filing Fees and Certificate of Status	□\$ and	180.00 Filing 1 Certified Copy	Fees ⁄	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Addi New Filing So Division of Co P.O. Box 632	ection orporations		]	New I Divisi	Address: Filing Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

FUED

## **Articles of Conversion**

For

"Other Business Entity" 2024 HAR 12 PM 4: 38

Florida Limited Liability Company N. L. ARY OF STATE

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

	Florida
1. The name of the "Other P.	mmediately prior to the filing of the Articles of Conversion is:
Brandonwill Enterprises In-	mmediately prior to the
-inciprises, inc.	arranged prior to the filing of the Articles of Convention
(Enter Name of	Other Business Entity)
	Stret Dusiness Entirely
2. The "Other Business Entity" is a not for pro	fit corporation
(Enter entity type. Example: compare)	n, limited partnership, general partnership, common law or business trust, etc.)
The corporation	n, limited partnership, general partnership
First organized, formed or incompany	real partite snip, common law or business trust etc.)
First organized, formed or incorporated under	the laws of Florida
	(Enter state or if
on	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formal)	and country)
(date of organization, formation or incorporation)	
3. The name of the Division	ompany as set forth in the attached Articles of Organization:
- Marie of the Florida Limited Liability Co	Impon
Brandonwill Enterprises LLC	ompany as set forth in the attached Articles of O
	At ticles of Organization:
(Enter Name of Florida Li	
(Enter Name of Florida Limi	ted Liability Company)
T. II DOLATIONIS.	
(The effective date: Cannot be	effective date:
the date this document is filed by the Florida   Note: If the date inserted in this block does not meet the al	receipt or filed date nor more than 90 calendar days after Department of State.) Opplicable statutory filing requirements, this date will not be listed as the ords.
document's effective date on the D	Oblicable stable of State.)
date of the Department of State's reco	ords.
5. The plan of some	as the
5. The plan of conversion has been approved in ac	Cordon
5. The "Converted or Other Pusing B	cordance with all applicable statutes
Onverted or Other Duction	

- 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 6th day of March	
C:_	20 <u>24</u>
Signature of Authorized Representative of	flimia de en
Signature of Authorized Representative:	Limited Liability Company:
Printed Name: C	
raine. Cecella O. Topo	Stille: Owner
Signature(s) on behalf of Other Business En	of the
O State Other Business En	tity: [See below for required.
Signature:	iot required signature(s)
Printed Name: Cocellad. Youp Signature:	
Signat	Title: CEO/Director
Printed No.	
Signature: Printed Name:  Signature:	Tial
Signature	Title:
Printed Name:	
Signature: Printed Name:  Signature:	Title:
Signature:	
Printed Name:	
Signature:  Signature:	Title:
Signature:	
Frinted Name:	
Signature: Printed Name: Signature:	litle:
Printed Name:	
Transport training.	Title:
If Florida Corneration	
Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected.	or Officer.
an in sciented, an	Incorporator
If Florida General Partnership or Limited Line	
If Florida General Partnership or Limited Liabi Signature of one General Partner.	lity Partnership:
If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners.	lity I imitad p
Signatures of ALL General Partners.	ny Emmed Partnership:
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	(Contraction of the Contraction
rees for Florida Articles of O	\$25.00
	\$125.00
Certificate of Status:	\$30.00 (Optional)
	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	2024 HAR 12 PM 4: 39
Brandonwill Enterprises, LLC	SIC LOARY OF STATE
(Must contain the words "Limited Liability	SIC HARY OF STATE  y Company, "L.L.C.," or "LLC.3) EE, FL
ARTICLE II - Address:	
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
The par Office Address.	Wannig Additess.
5398 SW 116th Place	5398 SW 116th Place
Ocala, FL 34476	Ocala, FL 34476
	<del></del>
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registre business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
•	
The name and the Florida street address of the re	egistered agent are:
Cecelia J. Yopp	
Name	;
5000 DW 440th Bloom	
5398 SW 116th Place Florida street address (P.O.	Roy NOT acceptable)
·	
Ocala	FL 34476
City	Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S

(CONTINUED)

nks Signature (REQUIRED)

### ARTICLE IV-

. . . .

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

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
AMBR	Morgan Catherine Yopp		
	4512 Rahel Street		
	Madison, WI 53716		
<del></del>			
	<del></del>		
<del></del>	<del></del>		
(Use attachment if necessary)  CLE V: Other provisions, if any.			
REQUIRED SIGNATURE:			
Signature of a member or a	an authorized representative of a member		
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felon		
Cecelia J. Yopp			
Typ	ped or printed name of signee		
	Eiling Francisco		

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)