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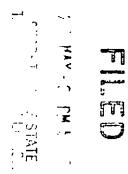
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Eiling Officer:	
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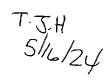




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#### **COVER LETTER**

<b>TO:</b> New Filing S Division of O						
SUBJECT: The Har	·					
SUBJECT:		sultin	g Florida Limit	ed Cor	npany)	
					nd fees are submitted to ecocordance with s. 605.104	
Please return all corr	respondence concernin	g thi	s matter to:			
Alvin J. Harris						
	(Contact Person)					
The Harris Business L	LC					
	(Firm/Company)					
1015 SW 13th Ave						
	(Address)					
Miami, FL 33135						
	City, State and Zip Code)		<del></del>			*
aharri24@gmail.com	TheHarrisB	usii	nessill	Oa.	mail.com	
E-mail Address: (to l	be used for future annual re	port	notifications)	J	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
For further informate	ion concerning this ma	itter.	please call:			
Alvin J. Harris		at	(909	532-	1961	F
(Name of Cont	act Person)		(Area Code)	(Day	vtime Telephone Number)	77.
	for the following amou a bank located in the			roces	sed by this office must be	payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Cop		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add					t Address:	
New Filing S Division of C					Filing Section ion of Corporations	
P.O. Box 632	-				Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N							
The name of the	Limited Liabili	ity Company is	:				
	The	Harris Business	, LLC				
(1)	Must contain the wo	ords "Limited Liabili	ity Company, "L.L.C.," or "LLC.")	)			
ARTICLE II - A The mailing addr		address of the p	orincipal office of the Limi	ted Liability Company is:			
Principal Office Address:			Mailing Address:				
Alvin J.Harris			Alvin J. Harris				
1015 SW 13th Ave	)		1015 SW 13th Ave				
Miami, FL 33135			Miami, FL 33135				
The name and the		Alvin J, Ha					
	1015 SW 13t Florida stre	_	D. Box NOT acceptable)				
	Miami		FL 33135				
		City	Zip				
liability con registered agen statutes relati	ipany at the pla it and agree to d ing to the prope obligations of m	ace designated i act in this capa or and complete by position as re	n this certificate, I hereby a city. I further agree to com performance of my duties, egistered agent as provided with the continue of the con	ply with the provisions of all and I am familiar with and			

### <u>Articles of Conversion</u>

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

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

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  The Harris Business LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Partnership (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
1/07/2021 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
The Harris Business LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

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 19th day of April	20 <u>34</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Alvin J. Harris, III	MANUEL STREET
Printed Name: Alvin J. Harris III	Title: Chief Executive Officer/Manager
Timed (value, value, vielle)	Time. Since Exceeded Since Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name: Alvin J. Harns, III	• • • • • • •
Signature:	mile Object Course in Office Atlanta
Printed Name: Aivin Ji. Harns, III	Title: Chief Executive Officer/Manager
Signature:	
Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	ty rattice and a
·	
If Florida Limited Partnership or Limited Liability	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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

<del></del>	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Alvin Harris III 1015 SW 13 Ave Miami, FL 33135
AMBR	Diana Harris
	11159 Starview Court
	Rancho Cucamonga, CA 91737
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
<del> </del>	
REQUIRED SIGNATURE:	O Hamo
Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Signature of a member or: This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony
Signature of a member or any false information submitted in a docur as provided for in s.817.155, F.S.	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware that

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