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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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May 2, 2024

CHARLES KINAHAN 1301 POLK CITY RD LOT 115 HAINES CITY, FL 33844 US

SUBJECT: SMOKEY'S STASH LLC Ref. Number: W24000068516

We have received your document for and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(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.

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

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 824A00009583

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.

~
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is Smokeys Stush LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Lieb, Ly Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Bucle
(Enter state, or if a non-U.S. entity, the name of the country)
on January 7, 2021 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Smokers Stash 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

 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 3 day of June	20 7
Signature of Authorized Representative of Limit	ted Liability Company:
	7
Signature of Authorized Representative: Printed Name: Charles Kinchen	Title: Out of
Signature(s) on behalf of Other Business Entity:	See below for required signature
Printed Name: Charles Knaham	Title: Owner
Signature:Printed Name:	Title
C:	
Signature:Printed Name:	Tr. 1
	Hue:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	· · · · · · · · · · · · · · · · · · ·
Signature of Chairman, Vice Chairman, Director, or (Officer
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	. n
Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ty Limited Partnership:
g	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Cartified Come	\$30.00 (Online)
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Smokey's Stash LLC	0	The Courses of L.C. or "LLC")	
(Mu	ist contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ad	ldress:	· · · · · · · · · · · · · · · · · · ·	· is·
The mailing addres	ss and street address of the	principal office of the Limited Liability Company	
Principal Office A	Addre <u>ss:</u>	Mailing Address:	
		1301 Polk City Rd Lot 115	
1301 Polk City Rd L Haines City, FL 338		Haines City, FL 33844	
The Limited Liability C business entity with an	active Florida registration.)	red Office. & Registered Agent's Signature: egistered Agent. You must designate an individual or another	
(The Limited Liability C business entity with an	Florida street address of t	egistered Agent. Tou make a segment and	
(The Limited Liability C business entity with an	Charles Kinahan	egistered Agent. Tou make a segment and	
(The Limited Liability C business entity with an	Charles Kinahan	ne registered agent are:	
(The Limited Liability C business entity with an	Charles Kinahan 1301 Polk City Rd Lot 115	ne registered agent are:	
(The Limited Liability C business entity with an	Charles Kinahan 1301 Polk City Rd Lot 115	ne registered agent are:	

Registered Agent's Signature (REQUIRED)

(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	Name and Address:
"MGR" = Manager	
AMBR	Charles Kinahan
	1301 Polk City Rd Lot 115
	Haines City, FL 33844

(II)	
(Use attachment if necessary)	
REQUIRED SIGNATURE:	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware t ment to the Department of State constitutes a third degree fel
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Charles Kinahan	with section 605.0203 (1) (b), Florida Statutes, I am aware t ment to the Department of State constitutes a third degree fel
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Charles Kinahan	with section 605.0203 (1) (b), Florida Statutes. I am aware t ment to the Department of State constitutes a third degree fel ped or printed name of signee
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Charles Kinahan Ty	with section 605.0203 (1) (b), Florida Statutes, I am aware t ment to the Department of State constitutes a third degree fel