L24000250415

(Requestor's Name)
(Address)
(Address)
(1.00.000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(0.55,000, 1.5,000
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Articles of Conversion

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 Articl Monahan Airways, LLC	es of Conversion is:
(Enter Name of Other Business Entity)	•
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	on law or business trust, etc.)
First organized, formed or incorporated under the laws of	name of the country)
March 20, 2009 on	takine of the country)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Arti	icles of Organization:
Monahan Airways, 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 9 the date this document is filed by the Florida Department of State.)	O calendar days after
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	e will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statutes.	
 The "Converted or Other Business Entity" has agreed to pay any members having apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	2024 At
	C.
	· (1)

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Signed this 27th day of Murch	_ 20 <u>24</u> .	
Signature of Authorized Representative of Limi		
Signature of Authorized Representative of Emil	teu Liabinty Company.	
Signature of Authorized Representative:	mal-	
Printed Name: Scott Monahan	Title: Manager Addicrized Member	
Filliten Name. Good Monarian	Fulle: Wastager Funts (200 / 1/2)	
Signature(s) on behalf of Other Business Entity: [See below for required signeture(s)!	
()	see below for required signature(s)[
Signature: Scot Ind		
Printed Name: Scott Monahan	Title: Attackized Member	
Times Time. Bear Tipo Heriogram	_ Tide	
Signature:		
Printed Name:	Title:	
Signature:		
Signature: Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
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	orporator must sign.	
If Florida General Partnership or Limited Liabilit	y Partnership:	
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:	
Signatures of ALL General Partners.		
A.U at	٠.	9
All others:		
Signature of an authorized person.		- . :
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<u>Fees:</u>		_
Adialan of Communication	#25.00	
Articles of Conversion:	\$25.00	نڌ
Fees for Florida Articles of Organization:	\$125.00	\)
Certified Copy:	\$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Monahan Airways, LLC (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3016 Camino Real Dr S	3016 Camino Real Dr S
Kissimmee, FL 34744	Kissimmee, FL 34744
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an individual or another
Scott Monahan Name	2024
Name	7
3016 Camino Real Dr S	
Florida street address (P.O.	• '
Kissimmee	FL 34744
City	Zip , çi
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	

(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	Scott Monahan
TIPO!	3016 Camino Real Dr S
	Kissimmee, FL 34744
	1100111111100, 1 2 0 71 7 7
-MGR AMBIR	Todd Monahan
MON HINDIX	31 High Pointe Dr
	Queensbury, NY 12804
(Use attachment if necessary)	
•	
CLE V: Other provisions, if any.	\$ 6 2
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REQUIRED SIGNATURE:	***
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_ Scclo Mer	
	_
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fe
Scott Monahan	
Ty	ped or printed name of signee
	t · F ·

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