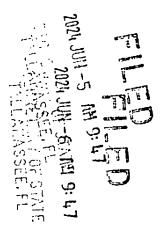
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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200429637752





COVER LETTER

TO:	New Filing S Division of C						
SHR	IECT:	GREENVI	EW RENOVATION	LLC			
., (, 1)		(Name of Res	sulting Florida Limite	ed Cor	npany)		
Busin	ess Entity" into	a "Florida Limited Li	iability Company'		d fees are submitted to co ccordance with s. 605.104		
Pleas	e return all corr	espondence concernin	g this matter to:				
		KATHY BALLAM					
		(Contact Person)					
	API PROC	ESSING - LICENSING,	INC.				
		(Firm/Company)					
	3419 GALT	OCEAN DRIVE, SUITE	ΕA				
		(Address)	10.00				
	FORT L	AUDERDALE, FL 33436	ŝ			20:	
	(1	City, State and Zip Code)					_
	KATHY@	APIPROCESSING.COM	1			- S - S	•
E-1	nail Address: (to b	e used for future annual re	port notifications)			3 3 3 S	-
For fu	irther informati	on concerning this ma	tter, please call:			高温	
	KATHY BALI	_AM	at (954)	1	567-0013		, T
	(Name of Conta	ict Person)	(Area Code)	(Day	time Telephone Number)		<u>.</u> .
Enclo dollar	sed is a check f s and drawn on	or the following amou a bank located in the	nt: (All checks pr United States)	roces	567-0013 Time Telephone Number) Sed by this office must be	payable in US	Ţ
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	\$155.00 Filing Fees and Certificate of Status	S180.00 Filing I and Certified Copy		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	rd 🖰	
	Mailing Add New Filing S Division of C P.O. Box 632	ection orporations	I I	New I Divisi	Address: Filing Section on of Corporations Centre of Tallahassee		

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Tallahassee, FL 32314

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: GREENVIEW RENOVATION INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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)
01/01/2024 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:
GREENVIEW RENOVATION LLC 29
(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.

May 31, 2024

Signed this day of	20
Signature of Authorized Representative	e of Limited Liability Company:
Signature of Authorized Representative: Printed Name; MEIDAN ELIYAHU	Title: AMBR
Signature(s) on behalf of Other Business	Entity: [See below for required signature(s)]
Simple A	
Printed Name: Meidan Eliyahn	Title: _Authorized Memher
Sionabura: /	Title: Authorized Member
Printed Name: Ofer Zeitoun	Title: Authorized Member
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Di If Directors or Officers have not been select	
If Florida General Partnership or Limit Signature of one General Partner.	ed Liability Partnership:
If Florida Limited Partnership or Limite Signatures of ALL General Partners.	ed Liability Limited Partnership:
All others: Signature of an authorized person.	
Fces:	
Articles of Conversion: Fees for Florida Articles of Organ Certified Copy: Certificate of Status:	\$25.00 nization: \$125.00 \$30.00 (Optional) \$5.00 (Optional)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	IOVATION LLC	
(Must contain the words "Limited L	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	he principal office of the Limited Liabili	ity Company is:
Principal Office Address:	Mailing Address:	
3150 MYSTIC HARBOR CIRCLE	8150 MYSTIC HARBOR CIRCLE	
BOYNTON BEACH, FL 33436	BOYNTON BEACH, FL 33436	
		
ARTICLE III - Registered Agent, Regist	tered Office, & Registered Agent's Sig	nature:
The Limited Liability Company cannot serve as its own		
business entity with an active Florida registration.)		
The name and the Florida street address of	the registered agent are:	
MEIDA ELIYAHU		
	Name	
·		
8150 MYSTIC HARBOR		型置
Florida street address	(P.O. Box NOT acceptable)	
BOYNTON BEACH	FL 33436	3 4
55111011527011	Cr.	Win 🖚
City	Zip	779章 元
City	•	四 五
City Having been named as registered agent a	and to accept service of process for the ab	
City Having been named as registered agent of liability company at the place designal	and to accept service of process for the ab ted in this certificate, I hereby accept the a	appointment as
City Having been named as registered agent a liability company at the place designal registered agent and agree to act in this c	and to accept service of process for the ab ted in this certificate, I hereby accept the c capacity. I further agree to comply with th	appointment ass, he provisions of all
City Having been named as registered agent of liability company at the place designal registered agent and agree to act in this constatutes relating to the proper and comp	and to accept service of process for the ab ted in this certificate, I hereby accept the c capacity. I further agree to comply with th plete performance of my duties, and I am f	appointment ass he provisions of all familiar with and
City Having been named as registered agent of liability company at the place designal registered agent and agree to act in this constatutes relating to the proper and comp	and to accept service of process for the ab ted in this certificate, I hereby accept the c capacity. I further agree to comply with th	appointment ass he provisions of all familiar with and
City Having been named as registered agent of liability company at the place designal registered agent and agree to act in this constatutes relating to the proper and comp	and to accept service of process for the ab ted in this certificate, I hereby accept the c capacity. I further agree to comply with th plete performance of my duties, and I am f	appointment ass he provisions of all familiar with and

(CONTINUED)

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
AMBR	MEIDAN ELIYAHU		
•	8150 MYSTIC HARBOR CIRCLE		
	BOYNTON BEACH, FL 33436		
AMBR	OFER ZEITOUN		
	8150 MYSTIC HARBOR CIRCLE		
	BOYNTON BEACH, FL 33436		
	·		
			
	 		
		<u>.</u>	
			
			
(Use attachment if necessary)			
		208	
ARTICLE V: Other provisions, if any.		运	
· · · · · · · · · · · · · · · · · · ·			
		SUMBS	9-8-
REQUIRED SIGNATURE:		7 <u>5</u>	E
Meldan Eliyahu (May 31, 2024 10:48 EDT)			

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

MEIDAN ELIYAHU

Typed or printed name of signee

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)