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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Statue
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Consideration to	Fire Off	·
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:	New Filing Se Division of Co						
SUBJ	ECT:	Squares P. (Name of Res	心の以合っ ulting Florida Limi	ted Com	pany)		
			-		d fees are submitted to corecordance with s. 605.1045		
Please	return all corre	espondence concerning	g this matter to:				
		(Contact Person)		_			
M	Squarea	(Firm/Company)	s LCC	_			
781	4 John	(Address)		_			
MIH	Palm P	Lach 13 City, State and Zip Code)	3407	-			
Wor-	hington	201F É amuil	port notifications)	-			
For fu	rther information	on concerning this mat	tter, please call:				
Wu	(Name of Conta	rthington II ct Person)	at (<u>OlY</u> (Area Code) 2) (Day	LSE 3379 time Telephone Number)		
		or the following amou a bank located in the		process	ed by this office must be p	payable in US	
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	•	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
	Mailing Addi New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New I Divisi The C 24151	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 81 assee, FL 32303	9-14	
INHSI	(7/17)					4410:48	Ö

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 Articles of Conversion is:
(Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of Ohio (Enter state, or if a non-U.S. entity, the name of the country)
on 8 12 2016 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liaounty 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 17 day of april	20 24
Signature of Authorized Representative of Lim	iited Liability Company:
Signature of Authorized Representative: Winter Printed Name: Wyada Wadanie II	t morthingtont
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Wyst Worthington The Wyst Worthington I	Title: ATA OWNER
Signature: Printed Name: NA	Title: NA
Signature: VA Printed Name: VA	Title: ~/A
Signature: NA Printed Name: NA	Title: ~ A
Signature: PA Printed Name: NA	
Signature: NA Printed Name: NA	Title: \/A
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabil Signature of one General Partner.	lity Partnership:
If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners.	ity Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

2024 JUH -6 AM IO: 48

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	any is:	
Must contain the words "Limited	Opuctions LLC d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Compan	ıy is:
Principal Office Address:	Mailing Address:	
7818 75th way Wist Palm Beach, FL 33407	Nest Pain Beach PL 33407	
	istered Office, & Registered Agent's Signature: vn Registered Agent. You must designate an individual or another	
The name and the Florida street address	of the registered agent are:	
Trisha Bernstein		
	Name	
4440 PGA Blvd. STE 6	500	
Florida street addres	ss (P.O. Box <u>NOT</u> acceptable)	
Palm Beach Gardens	FL ³³⁴¹⁰	
City	Zip	
liability company at the place design registered agent and agree to act in this statutes relating to the proper and con	t and to accept service of process for the above stated to nated in this certificate. I hereby accept the appointment is capacity. I further agree to comply with the provision in plete performance of my duties, and I am familiar with the as registered agent as provided for in Chapter 605. F	it as is of all h and
Trisha i	Bernstein	
Registered Agent	t's Signature (REQUIRED)	
(CC	ONTINUED)	2 022

Commence of the second

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

<u>[itle:</u> AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
rack - Mailager	What worthington TI
1.4.4.3	Nyatt worthington II 1518 78th way With Palm Beach FL 33407
	West Palm Beach FL 3340
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<u></u>	NA
	<u>- PIA</u>
	<u> </u>
WIA	NIA
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Use attachment if necessary)	ر. 1٠
E V: Other provisions, if any,	r
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REQUIRED SIGNATURE:	
Wystt Wollhindon	
Wystt Worthington	
Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member or This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree t
Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S.	

(1,) (2,) (2,) (2,) (2,) (3,) (4,)