# L24000259665

(Reques	stor's Name)
(Address	5)
(Address	s)
(City/Sta	nte/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busines	ss Entity Name)
(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	g 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 CONRAD'S GUTTERS, INC.	to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entit	y)
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnersh	ip, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of	Florida  ate, or if a non-U.S, entity, the name of the country)
04/20/2023	ate, of it a non-old, entity, the name of the country)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set CONRAD'S GUTTERS, LLC	forth in the attached Articles of Organization:
	·
(Enter Name of Florida Limited Liability Con	ipany)
4. If not effective on the date of filing, enter the effective date	
(The effective date: Cannot be prior to date of receipt or fil the date this document is filed by the Florida Department of Note: If the date inserted in this block does not meet the applicable statuto document's effective date on the Department of State's records.	of State.)
5. The plan of conversion has been approved in accordance wi	th all applicable statutes.
<ol> <li>The "Converted or Other Business Entity" has agreed to pay at which such members are entitled under ss. 605,1006 and 605.</li> </ol>	
	· œ

Signed this 14 day of May	_20_ <b>24</b>	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: <u>C. Ba</u> Printed Name: Conrad Banton	Title: MGR	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	_ Title:	
Signature: Printed Name:	_ Title:	
Signature: Printed Name:	_ Title:	
Signature: Printed Name:	_ Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		4
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	1

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CONRAD'S GUTTERS, LLC			
(Must contain the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
<del>-</del> •	of the principal office of the Limited Liability Company is		
The manning address and street address	of the principal office of the Emilied Elability Company is		
	Mailing Address:		
Principal Office Address:	Mailing Address:		
Principal Office Address:	Mailing Address:		
Principal Office Address: 18620 NW 22ND AVE	Mailing Address: 18620 NW 22ND AVE		

The name and the Florida street address of the registered agent are:

Conrad Banton		: .
Nai	ne	,
18620 NW 22ND AVE		<u> </u>
Florida street address (P.	O. Box NOT acceptable)	Ü
MIAMI GARDENS	FL 33056	H <sub>1</sub>
City	Zip	·
		÷-

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

C. Barton
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Conrad Banton 8620 NW 22ND AVE MAMI GARDENS, FL 33056	
8620 NW 22ND AVE	
8620 NW 22ND AVE	
MAMI GARDENS, FL 33056	
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)