L24000270420

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Linkly Harrie)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer:





300430905283

08/05/24--01024--014 **150.00

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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.

Sofia M&H Star LLC (Enter Name of Other Business Entity)	·
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, con	nmon law or business trust, etc.)
First organized, formed or incorporated under the laws of	, the name of the country)
07/23/2021 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached A Sofia M&H Star LLC	Articles of Organization:
(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 that 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 document's effective date on the Department of State's records.	•
5. The plan of conversion has been approved in accordance with all applicable statute	es.
6. The "Converted or Other Business Entity" has agreed to pay any members having app which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.	raisal rights the amount to
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	2024 July - J
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Signed this 21 day of May	20 <u>24</u>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Marianna Mayers	_ Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature Marianna Masse	eds
Signature: Marianna Mayers Printed Name: Marianna Mayers	Title: Manager
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	Officer
If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili	ity Partnershin
Signature of one General Partner.	tev rarticismy.
If Florida Limited Partnership or Limited Liabili	ty I imited Dartnarching
Signatures of ALL General Partners.	ty Emilieu rai thersing.
All others:	
Signature of an authorized person.	
Fees:	; ;
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Sofia M&H Star LLC		
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the pr	incipal office of the Limite	d Liability Company is:
Deinainal Office Address.	Matter Address	
Principal Office Address:	Mailing Address:	
10939 Avana Way, Apt 302	10939 Avana Way, Apt 302	2
Trinity, FL 34655	Trinity, FL 34655	
		
ARTICLE III - Registered Agent, Registered	Office, & Registered Age	ent's Signature:
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an i	andividual or another
The name and the Florida street address of the r	egistered agent are:	
Madaga Mayan	-	
Marianna Mayers Name		
Name		
10939 Avana Way, Apt 302		
Florida street address (P.O.	Box NOT acceptable)	
Trinity	FL. 34655	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capact statutes relating to the proper and complete paccept the obligations of my position as regularization. Registered Agent's Sign	this certificate, I hereby acc ty. I further agree to compl erformance of my duties, an istered agent as provided fo	cept the appointment as y with the provisions of all ad I am familiar with and
Registered Agent's Sign	ature (KEQUIRED)	47 %
		20
(CONTIN	JED)	

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 MGR	Marianna Mayers 10939 Avana Way, Apt 302
	Trinity, FL 34655
	2024
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	· 2: 20
REQUIRED SIGNATURE: Marianna Ma	aisers
Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Marianna Mayers Typ	ped 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)