# L24000273675

(Requestor's Name)
(Address)
(Address)
(/ louic33)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
75 T. V.
(Business Entity Name)
(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 Article Lyons Enterprise LLC	es of Co	onversion i	s: <b>ም</b> ረ /
Lyons Enterprise LLC (LYONS - Montgemery Enterprise / L (Enter Name of Other Business Entity)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. •
2. The "Other Business Entity" is a			
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	n law or	business trus	t, etc.
First organized, formed or incorporated under the laws of(Enter state, or if a non-U.S. entity, the		<u></u>	
	name or	the country)	
1/15/2021 on .			
(date of organization, formation or incorporation)			
(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.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	0 calen		
5. The plan of conversion has been approved in accordance with all applicable statutes.	?	2024	
<ol> <li>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.</li> </ol>	al right	s the amou	nt to
		<u>ب</u> : 4-	
		£_	

•	•		
Signed this	_25_ day of March	_ 20 <u>_24</u>	
Signature o	of Authorized Representative of Limi	ted Liability Company:	
		4.4.5	
Signature of	f Authorized Representative: Kahin	HWany	
Printed Nam	f Authorized Representative: Robin Montgomery	Title: Manager	
<u>Signature(s</u>	) on behalf of Other Business Entity:	[See below for required signature(s)]	
Clanatura	Robin Montgomery		
Signature: _	- Robin Montgomeny	Title: Manager	
Printed Nam	le: Hobiii Worligomery	Title:	
Cianotura:			
Drinted Nam	ne.	Title:	
rimed Nan	ic.	Title.	
Signature:			
Printed Nam	ne:	Title:	
i inited ivan			
Signature:			
Printed Nam	ne:	Title:	
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Signature:			
Printed Nam	ne:	Title:	
Signature:			
Printed Nan	ne:	Title:	
If Florida C	Corporation:		
Signature of	Chairman, Vice Chairman, Director, or	Officer.	
If Directors	or Officers have not been selected, an In-	corporator must sign.	
	<u>General Partnership or Limited Liabili</u>	ty Partnership:	
Signature of	fone General Partner.		
	imited Partnership or Limited Liabili	ty Limited Partnership:	
Signatures c	of <u>ALL</u> General Partners.		
All others:			
Signature of	an authorized person.		٠,
Fees:			,
	alaa af Cananaiana	\$25.00	
	cles of Conversion:	\$25.00	
	s for Florida Articles of Organization:	\$125.00	
	tified Copy:	\$30.00 (Optional)	
Cert	tificate of Status:	\$5.00 (Optional)	٠.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<u> </u>	(Must contain the words "1 imit	yons - Meitgomary Entar	ا مهم		
	(Must contain the words 15mm	ted Elability Company, E.E.C., or DEC. 7			
ARTICLE II -	Address:		1.1.1.1.111	. Cammanu in	
The mailing ad	dress and street address	of the principal office of the Limite	a Liability	y Company is.	
Principal Offic	ce Address:	Mailing Address:			
7010 Lake Nona	a Blvd.	7010 Lake Nona Blvd.			
Apt. 465		Apt. 465	Apt. 465		
Orlando, FL 328	327	Orlando, FL 32872			
		s of the registered agent are:	:	20	
	Gabrielle Montgome	ry	• •	202 <b>4</b> .ir	
	Gabrielle Montgome			2024 . W	
		Name	:	2024 Nr 2	
	7010 Lake Nona Blv	Name		2024 Arr - 2 .	
	7010 Lake Nona Blv Florida street addi	Name rd., #465 ress (P.O. Box <u>NOT</u> acceptable)	: :	N - 2.	
	7010 Lake Nona Blv	Name rd., #465 ress (P.O. Box <u>NOT</u> acceptable) FL 32827	:	W. S.	

(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 Robin Montgomery	7010 Lake Nona Blvd., #465 Orlando, FL 32827	
AMBR	Gabrielle Montgomery 2010 Lake Nona Blud 465 Orlando Fl 32827	
(Use attachment if necessary)		9024 AF
ARTICLE V: Other provisions, if any.		1
		<u>ن</u>
REQUIRED SIGNATURE:		<b>t</b>
Robin Thong	フ	
Signature of a member or a This document is executed in accordance v	n authorized representative of a memb with section 605.0203 (1) (b), Florida Statutes. I ar	er n aware that

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.

Robin Montgomery

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)