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TALL AMASSEE, FL

ALLAHASSEL FOR TATE

RECEIVED

COVER LETTER

TO: New Filing Section Division of Corporations							
PANE IN THE OLACO MINION	MC II.						
SUBJECT: PANE IN THE GLASS WINDOV		Florida Limite	rd Con	many)	_		
(Name of Ki	cauring	rionda Linik	u Con	ipany)			
The enclosed Articles of Conversion, Arti Business Entity" into a "Florida Limited I							her
Please return all correspondence concernit	ng this	matter to:					
GAVIN WRIGHT							
(Contact Person)							
PANE IN THE GLASS WINDOWS LLC							
(Firm/Company)	-						
1900 RESERVE BLVD APARTMENT 6301							
(Address)							
GULF BREEZE FLORIDA 32563							
(City, State and Zip Code)					() < { () ! () !	2024	
Gavin.wright910@gmail.com						ال	===
E-mail Address: (to be used for future annual r	eport ne	otifications)			35	02 NOC 1202	72
For further information concerning this m	atter, p	lease call:			SSEE.) AM	1
GAVIN WRIGHT	at (850	816 7	539		9:4:	
(Name of Contact Person)	a. ((Area Code)	(Day	time Telephone Number)	- , tu	47	
Enclosed is a check for the following amo dollars and drawn on a bank located in the	-	-	ocess	sed by this office must b	oe payabl	le in U	S
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) S155.00 Filing Fees and Certificate of Status		180.00 Filing I Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Address:		4	Street	Address:			
New Filing Section				Filing Section			
Division of Corporations P.O. Box 6327				on of Corporations entre of Tallahassee			
1.U. DUA UJZ/			🛡	Chie Or randhassec			

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 <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 PANE IN THE GLASS WINDOWS LLC	of Conversion is:	
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common limited partnership.	law or business trust,	etc.)
First organized, formed or incorporated under the laws of KENTUCKY		
(Enter state, or if a non-U.S. entity, the na	ame of the country)	
on \(\frac{3/4/24}{\text{(date of organization, formation or incorporation)}}\). 3. The name of the Florida Limited Liability Company as set forth in the attached Article.	2024 JU	
3. The name of the Florida Limited Liability Company as set forth in the attached Article	es of Organizatio	n l
PANE IN THE GLASS WINDOWS LLC		
(Enter Name of Florida Limited Liability Company)	MH 9: L	
4. If not effective on the date of filing, enter the effective date:	- 17	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 of 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 we 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.

\$25.00

\$125.00

Signed this 14 day of JUNE 20 24

Signatures of ALL General Partners.

Signature of an authorized person.

Articles of Conversion:

Fees for Florida Articles of Organization:

All others:

Fees:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

	S WINDOWS LLC t contain the words "Limited Lia	ability Company, "L.L.C.," or "LI.C.")	
ARTICLE II - Ado	lress:		
The mailing address	and street address of th	e principal office of the Limited	d Liability Company is:
Principal Office Ac	ddress:	Mailing Address:	
1900 RESERVE BLV	D. APARTMENT 6301	1900 RESERVE BLVD. AP	ARTMENT
Gulf Bres	eze florida	6301 Gulf Bree	
32563		flocida 32563	_
ARTICLE III - Re	npany cannot serve as its own R	ered Office, & Registered Age Registered Agent. You must designate an i	ent's Signature: ndividual or another
ARTICLE III - Re (The Limited Liability Cor- business entity with an ac	npany cannot serve as its own R	ered Office, & Registered Age degistered Agent. You must designate an i	ndividual or another
ARTICLE III - Re (The Limited Liability Cor- business entity with an ac The name and the Fl	npany cannot serve as its own R tive Florida registration.)	ered Office, & Registered Age degistered Agent. You must designate an i	ndividual or another
ARTICLE III - Re (The Limited Liability Cor- business entity with an ac The name and the Fl	npany cannot serve as its own Retive Florida registration.) Florida street address of the GAVIN WRIGHT	ered Office, & Registered Age degistered Agent. You must designate an i	ndividual or another
ARTICLE III - Re (The Limited Liability Cor- business entity with an ac	npany cannot serve as its own Retive Florida registration.) Florida street address of the GAVIN WRIGHT	ered Office, & Registered Age Registered Agent. You must designate an in the registered agent are:	ndividual or another
ARTICLE III - Re (The Limited Liability Cor- business entity with an ac	npany cannot serve as its own Retive Florida registration.) lorida street address of the GAVIN WRIGHT N 1900 RESERVE BLVD. AI	ered Office, & Registered Age Registered Agent. You must designate an in the registered agent are:	ndividual or another 2024 JUN 20
ARTICLE III - Re (The Limited Liability Cor- business entity with an ac The name and the F)	npany cannot serve as its own Retive Florida registration.) lorida street address of the GAVIN WRIGHT N 1900 RESERVE BLVD. AI	ered Office, & Registered Age degistered Agent. You must designate an in the registered agent are: ame PARTMENT 6301	ndividual or another

Registered Agent's Signature (REQUIRED)

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.

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR

ARTICLE VI: Other provisions, if any,

REQUIRED SIGNATURA

the date of filing.)

99-1726403

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing:

the document's effective date on the Department of State's records.

Signature of a member of an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed

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.

. (OPTIONAL).

Gavin Wright
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)

S 5.00 Certificate of Status (Optional)