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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duning and Entity Alama)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
'
Special Instructions to Filing Officer:

Office Use Only



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2024 BAL 20 GG 2:

Articles of Conversion For "Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

(Enter Name of Other Business Entity)
Limited Liability Company The "Other Business Entity" is a
The "Other Business Entity" is a
rst organized, formed or incorporated under the laws of
June 9, 2015
date of organization, formation or incorporation)
The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: pt. B Photography, LLC
(Enter Name of Florida Limited Liability Company)
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
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e date this document is filed by the Florida Department of State.)
te date this document is filed by the Florida Department of State.) ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cument's effective date on the Department of State's records.
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this 9th day of May.	20 24		
Signature of Authorized Representative of Limi			
_			
Signature of Authorized Representative:			
Printed Name: Anwen "Wendy" Norman	Title: Authorized/Sole Member/Manage		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)		
Λ Λ			
Signature: Anwen "Wendy" Norman			
Printed Name: Anwen "Wendy" Norman	Title: Authorized/Sole Member/Manage		
Piamatura.			
Signature:Printed Name:	Title		
rimed Name.			
Signature:			
Signature:Printed Name:	_ Title:		
Signature:Printed Name:	m'st		
Printed Name:	Fille:		
Signature:			
Signature:	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 Inc			
,	, ,		
<u>If Florida General Partnership or Limited Liabili</u>	ty Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	- ''		
		7.	د .دا دعه
All others:			292 4 Hz
Signature of an authorized person.			<u> </u>
Fccs:			5
Articles of Conversion:	\$25,00		:-
Fees for Florida Articles of Organization:	\$125.00		
Certified Copy:	\$30.00 (Optional)) .	
Certificate of Status:	\$5.00 (Optional)	;	_

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N	ame:		,
	Limited Liability Compar	ny is:	
Apt. B Photograph	ny, LLC		
		liability Company, "L.L.C.," or "LI.C.")	
ADVETON DES	4 1 2		
ARTICLE II - A The mailing addi		he principal office of the Limited	Liability Company is:
Principal Office	Address:	Mailing Address:	
10879 53rd Avenu	ue North	Same	
St. Petersburg, FL	. 33708		
(The Limited Liability business entity with a	Company cannot serve as its own in active Florida registration.) e Florida street address of	tered Office, & Registered Agen Registered Agent. You must designate an inc the registered agent are:	
	Anwen Norman	Name	
	1	Natic	
	10879 53rd Avenue Nort		
		(P.O. Box <u>NOT</u> acceptable)	
	St. Petersburg	FL 33708	
	City	Zip	
liability con registered ager statutes relati	npany at the place designa nt and agree to act in this c ing to the proper and comp	and to accept service of process for ted in this certificate, I hereby acce apacity. I further agree to comply plete performance of my duties, and as registered agent as provided for	ept the appointment as with the provisions of al l I am familiar with and
	A		2924 HA (
	Registered Agent's	Signature (REQUIRED)	77
	-		· 20
	(CON	TINUED)	>>
			१२३ 🔅

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
AMBR/MGR	Anwen Norman		
	10879 53rd Avenue North St. Petersburg, FL 33708		
	St. Feleisburg, FE 33700		
			
	37		
	:		
(Use attachment if necessary)	•		
LE V: Other provisions, if any.	2.1		
SE V. Onici provisions, it any.			
	· ·		
	<u></u>		
	·		
REQUIRED SIGNATURE:			
Signature of a member or :	an authorized representative of a member		
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, I am aw		
 any false information submitted in a docur as provided for in s.817.155, F.S. 	nent to the Department of State constitutes a third degre		
43 DIOTIGEA IOI III 3.017.133, 1,13.			

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)