# L24000788633

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

Office Use Only



700429631357

124 JUN 27 AM 10:

# CORPORATE ACCESS,

# When you need ACCESS to the world

INC.

236 Fast 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

# WALK IN

	CERTIFIED COPY	Υ	
XX	РНОТОСОРУ	- <del></del>	
	GS		
XX	FILING	CONVERSION	. >
		<u></u>	
	TENNESSEE LLO ORPORATE NAME AND		3
(C	ORPORATE NAME AND	DOCUMENT #)	
			•
(C	ORPORATE NAME AND	DOCUMENT#)	
(C	ORPORATE NAME AND	DOCUMENT#)	
īC	ORPORATE NAME AND	DOCUMENT #)	
10	ORPORATE NAME AND	DOCUMENT #)	

#### **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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: E Tennessee LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
TENNESSEE First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
04/16/2019 on
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
E Tennessee LLC
(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 90 calendar days after 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 will not be listed as the 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.

Signed this 26TH day of JUNE	20 24
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: /S/JOS	EPH RICCIUTI
Printed Name: JOSEPH RICCIUTI	Title: AUTHORIZED PERSON
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: /S/JOSEPH RICCIUTI	
Printed Name: JOSEPH RICCIUTI	Title: AUTHORIZED PERSON
Timed Name.	Title.
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	mil.
Printed Name:	Title:
Signature:	
Printed Name:	Title:
0	
Signature:Printed Name:	Title
Frinted Name.	1106
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
•	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
E Tennessee LLC			
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of the pri	ncipal office of the Limited	Liability Compa	any is:
Principal Office Address:	Mailing Address:		
777 3rd Avenue, 26th Floor	777 3rd Avenue, 26th Floor		
New York, NY, 10017	New York, NY, 10017		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agen red Agent. You must designate an inc	it's Signature:	
The name and the Florida street address of the re	egistered agent are:	29.7	' <u> </u>
RIVERSIDE FILINGS LLC		27	۔ د۔ ٠ ڪ۔
Name			-
155 OFFICE PLAZA DR. 1ST F	<u>-</u> L		و
Florida street address (P.O.	Box NOT acceptable)		
TALLAHASSEE	FL 32301		

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..

Zip

/s/ELLIOTT TEITELBAUM
Registered Agent's Signature (REQUIRED)

City

A	DT	$\Gamma \cap \Gamma$	E.	11/
- /-	ĸ		r	1 V -

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Inner Director
AMBR	Joseph Ricciuti
	777 3rd Avenue, 26th Floor
	New York, NY, 10017
<del></del>	
<del></del>	
(Use attachment if necessary)	
(Ose attachment if necessary)	
LE V: Other provisions, if any.	
•	
	(1)
REQUIRED SIGNATURE:	
/s/Joseph Ricciuti	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awanent to the Department of State constitutes a third degree
Joseph Ricciuti	
Tvr	ped or printed name of signee
- J r	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)