# La4000290428

(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



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#### **COVER LETTER**

Division of C	Corporations				
SUBJECT: BLove S	ervices LLC				
	(Name of Re	sulting Florida Lir	nited Cor	mpany)	
The enclosed Article Business Entity" into	s of Conversion, Artic a "Florida Limited L	eles of Organiza iability Compa	ition, ar ny" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.	
Please return all corr	espondence concernin	g this matter to	:		
Corey Franklin					
BLOVE Services Inc.	(Contact Person)				
324 NW Ave. F	(Firm/Company)				
Belle Glade, FL 33430	(Address)		_		
(( bloveservices10@gma	City, State and Zip Code)				
E-mail Address: (to b	e used for future annual re	port notifications)	_		
For further informati	on concerning this ma	tter, please call	:		
Corey Franklin		. 561 at (	905-9	9898	
(Name of Conta	ct Person)		e) (Day	rtime Telephone Number)	
	or the following amou a bank located in the		proces	sed by this office must be payable in US	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co		\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section			t Address: Filing Section		
Division of Corporations				Division of Corporations The Centre of Tallahassee	
				2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

TO: New Filing Section

## 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: BLOVE SERVICES INC
(Enter Name of Other Business Entity) corporation
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)  Florida
First organized, formed or incorporated under the laws of
December 22, 2023 (Enter state, or if a non-U.S. entity, the name of the country)
on
on
3. The name of the Florida Limited Liability Company as set forth in the <b>attached Articles of Organization</b> : BLove Services LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: <u>June 3, 2024</u> .  (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 13th day of May	_20 <u>_24</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:   Printed Name: Corey S. Franklin	Title: Director
Signature(s) on behalf of Other Business Entity: [	
Signature: W. C. C. Printed Name: Brandy Love	Title: President
Signature:Printed Name:	
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 Officers have not been selected, an Inc.	Officer.
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	A A CONTROL OF THE CO
<u>Fees:</u>	8

Articles of Conversion: \$25.00 \$125.00

Fees for Florida Articles of Organization: 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:

	(Must contain the words "Limited Lic	bility Company, "L.L.C.," or "L.L.C.")
ARTICLE H	- Address:	
The mailing ad	dress and street address of the	principal office of the Limited Liability Company
Principal Offi	ce Address:	Mailing Address:
324 NW Ave F		PO Box 633
Belle Glade, FL:	33430	Belle Chat FL 33430
USA		USA
(The Limited Liabili business entity with	ity Company cannot serve as its own R h an active Florida registration.)	red Office, & Registered Agent's grature: gistered Agent. You must designate an individual or another
(The Limited Liabili business entity with	ity Company cannot serve as its own R	red Office, & Registered Agent's Egnature: gistered Agent. You must designate an individuation another e registered agent are:
(The Limited Liabili business entity with	ity Company cannot serve as its own R h an active Florida registration.) the Florida street address of the Corev Franklin	red Office, & Registered Agent's Egnature: gistered Agent. You must designate an individuation another e registered agent are:
(The Limited Liabili business entity with	ity Company cannot serve as its own R h an active Florida registration.) the Florida street address of the Corev Franklin	red Office, & Registered Agent's Egnature: gistered Agent. You must designate an individuation another e registered agent are:
(The Limited Liabili business entity with	ity Company cannot serve as its own R h an active Florida registration.) The Florida street address of the Corev Franklin  No. 1649 SE 4th Street	red Office, & Registered Agent's genature: gistered Agent. You must designate an individuation another e registered agent are:
(The Limited Liabili business entity with	ity Company cannot serve as its own R h an active Florida registration.) The Florida street address of the Corev Franklin  No. 1649 SE 4th Street	red Office, & Registered Agent's Equature: gistered Agent. You must designate an individual or another gistered Agent are:  e registered agent are:  The Property of the prope

Registered Agent's Signature (REOUIRED)

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	Corey Franklin	
	649 SE 4th Street	
	Belle Glade, FL 33430	
MGR	Brandy Love	
	324 NW Ave F	
	Belle Glade, FL 33430	
		•
(Use attachment if necessary)		· •
		45704
ARTICLE V: Other provisions, if any.	NOTES SEE	
··		
	200 4	
	3 3	
<b>REQUIRED SIGNATURE:</b>	3	
1351		
This document is executed in accordance w	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware tha ent to the Department of State constitutes a third degree felon	t y
COREY S. FRANKLIN	)	
Тур	ed 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)