L24000321747

(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: 05/14/24
1461 W24000061763

Office Use Only



100427016481

S. CHATHAM
JUL 2024

94/04/24--01024--018 **150.00





April 18, 2024

GREGORY HERMAN-GIDDENS TRUST COUNSEL LAW FIRM 1415 PANTHER LANE, SUITE 534 NAPLES, FL 34109 US

SUBJECT: VOYAGEONS, LLC Ref. Number: W24000061763

We have received your document for VOYAGEONS, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Rickey L Richardson Regulatory Specialist II

Letter Number: 524A00008515

COVER LETTER

TO:	New Filing Division of	Section Corporations						
SUBJ	ECT: VOYAG	GEONS, LLC						
			esulting Florida Li	mited Co	Ompany)			
The en	closed Articless Entity" int	es of Conversion, Arti o a "Florida Limited L	cles of Organiza Liability Compa	ation, a ny" in	and fees are submitted to con accordance with s. 605,1045	ivert an " 5, F.S.	Other	•
Please	return all cor	respondence concernit	ng this matter to) :				
Gregor	y Herman-Gido	dens						
TrustCo	ounsel Law Fire	(Contact Person)		_				
		(Firm/Company)	-	_				
1415 P	anther Lane, S	te. 534						
	<u>-</u> -	(Address)		_				
Naples,	FL 34109							
		City, State and Zip Code)		_				
ghgidde	ns@trustcoun	selpa.com						
E-ma	il Address. (to b	e used for future annual re	port notifications)	_				
For furt	her informati	on concerning this ma	tter, please call:					
Ashley (_at (239	\933-	2097			
	(Name of Conta	ct Person)) 2) (Dav	time Telephone Number)			
Enclose dollars a	d is a check f and drawn on	or the following amou a bank located in the	nt: (All checks		sed by this office must be pa	yable in	US	
(\$25 for C	00 Filing Fees Conversion or Articles zation)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	~	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		2024 MAY 14	()
[[]	Mailing Addr New Filing Se Division of Co P.O. Box 6321 Fallahassee, F	ection orporations 7		New I Divisi The C 2415?	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		4 PM 5: 05	EIVED

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 of Conversion is: VOYAGEONS, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
April 30, 2018 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 : VOYAGEONS, 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
Signature of Authorized Representative of Limited Liability Company:
Signature of Authorized Representative: Mll Maria Grander Printed Name: Bellinda Maria Higgins Title: Manager
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Mulle Maria Hagins Title: Manager Printed Name: Rulinda Maria Higgins Title: Manager
Signature: Title: Title:
Signature:
Signature: Printed Name: Title:
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 Incorporator must sign.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.
All others:

Signature of an authorized person.

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

\$30.00 (Optional) \$5.00 (Optional)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	v is:
	,
VOYAGEONS, LLC (Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
The second of th	anny company, Tables, of Thee.
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
15603 Derna Terrace	15603 Derna Terrace
Bradenton, FL 34211	Bradenton, FL 34211
The name and the Florida street address of the Bellinda Maria Higgins	ame
187	diffe
15603 Derna Terrace	
Florida street address (I	P.O. Box <u>NOT</u> acceptable)
Bradenton	_{FT.} 34211
City	Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple	id to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of acte performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S

ARTICLE IV-

Title:

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

"AMBR" = Authorized Member	
"MGR" = Manager	
MGR — Manager	h 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	James K. Higgins
	15603 Derna Terrace
	Bradenton, FL 34211
MGR	Don't be a second
Mart	Bellinsa Maria Higgins
	15603 Derna Terrace
	Bradenton, FL 34211
(Use attachment if necessary)	
(The manufacture in the costally)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	// \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Main Hy
REQUIRED SIGNATURE:	
Signature of a member or a	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felor
Signature of a member or a This document is executed in accordance vany false information submitted in a document as provided for in s.817.155, F.S. Bellinda Maria Higgins	in authorized representative of a member with section 605,0203 (1) (b). Florida Statutes. I am aware the bent to the Department of State constitutes a third degree felor
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