# L24000340119

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO:	New Filing S Division of C				
SURI	ECT: Delivery	USA Now, LLC			
SODS	LC1	(Name of Re	sulting Florida Lim	ited Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	return all corr	espondence concernin	g this matter to:		
Mahra	Sarofsky, Esq.				
		(Contact Person)		_	
Ward	Damon PL				
		(Firm/Company)			
4420 E	Beacon Circle				
		(Address)			
West f	Palm Beach, FL	33407			
	((	City, State and Zip Code)		_	
msaro	fsky@warddamo	on.com			
E-m	nail Address: (to b	e used for future annual re	port notifications)		
For fu	rther information	on concerning this ma	tter, please call:		
Mahra	Sarosfky		_at ( <sup>561</sup>	842-	3000
	(Name of Conta	ct Person)		(Day	time Telephone Number)
		or the following amou a bank located in the	•	process	sed by this office must be payable in US
(\$25 for & \$125	0.00 Filing Fees r Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Co		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New I Divisi The C	t Address: Filing Section on of Corporations Jentre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

### 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:  Delivery USA Now, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Delivery USA Now, LLC  (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)
07/10/2020 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:
Delivery USA Now, 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 this8 day of July	2024
Signature of Authorized Representative of Lim	ited Liäbility Company:
Signature of Authorized Representative of Lim Signature of AuthorizedRepresentative: Printed Name: Cery Perle	Porla
Signature of Authorized Representative:	:: 19751 - Manager
Printed Name: Cery Perie	Title: Widnages
Signature(s) on behalf of Other Business Entity:	
70 0	(27)
Signature: Cary Parla	
Printed Name: **Cery Perles: #1	Title:Manager
Signature:	
Printed Name:	Title
Timed Name.	Title.
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
THIS TAIRS.	
Signature:	
Printed Name:	Title:
Signatura:	
Signature: Printed Name:	Title
rinted (value,	Time:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	
remail of the state of the state of	
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	<u>ty Partnership:</u>
Signature of one General Partiter.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	<b>F</b> -
All rates	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
Collisions of Canada	45.00 (Optional)

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Dolivon HSA	Now 11 C		
Delivery USA I	(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II The mailing a	- Address: ddress and street address of the	e principal office of the Limit	ed Liability Company is:
Principal Off	ice Address:	Mailing Address:	
10226 Curry F		10226 Curry Ford Rd. 7	
Orlando, FL 32	825	Orlando, FL 32825	<del></del>
The name and	4420 BEACON CIRCLE Florida street address (F	S SERVICES LLC ame  2.0. Box NOT acceptable)	
	WEST PALM BEACH	FL 33407	
	City	Zip	
liability o registered az statutes red	n named as registered agent and company at the place designated gent and agree to act in this caplating to the proper and complete obligations of my position as	d in this certificate, I hereby a pacity. I further agree to comp te performance of my duties, c	ccept the appointment as ply with the provisions of al and I am familiar with and

(CONTINUED)

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

"AMBR" = Authorized Member	
'MGR" = Manager	050)/050/5
MGR	CERY PERLE
	10266 Curry Ford Road 7
	Orlando, FL 32825
	·
	<del></del>
Use attachment if necessary)  E V: Other provisions, if any.  REQUIRED SIGNATURE:  City Perla	
REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member
E V: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Cery Perle	e with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel
Signature of a member or This document is executed in accordance any false information submitted in a document approvided for in s.817.155, F.S.  Cery Perle	with section 605,0203 (1) (b), Florida Statutes, I am aware t