# L24000374939

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





800434634728

08/16/24--01026--024 \*\*155.00



## **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: Wildflower Enterprises, LLC			
(Name of	Resulting Florida Limited (	Company)	<del></del>
The enclosed Articles of Conversion, A Business Entity" into a "Florida Limited	rticles of Organization. d Liability Company" i	and fees are submitted n accordance with s. 60:	to convert an "Other 5.1045, F.S.
Please return all correspondence concer	ming this matter to:		
Raymond T. Hyer, Jr.			
(Contact Person)			
(Firm/Company)			
750 Gulf Boulevard			2
(Address)			
Belleair Shores, FL 33786			2024 AUG 16
(City, State and Zip Coc	le)		16
golferhyer@gmail.com			
E-mail Address: (to be used for future annua	al report notifications)		
For further information concerning this	matter, please call:		MH 7: 43
Dax Nelson, Esq.	at (813) 73	39-6695	
(Name of Contact Person)		Daytime Telephone Number	<del></del> )
Enclosed is a check for the following an dollars and drawn on a bank located in t	nount: (All checks proc he United States)	essed by this office mus	st be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fee and Certificate of Status	es \$\Bigsigs \\$180.00 \text{ Filing Fee} and Certified Copy	s \$185.00 Filing Fees. Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ne Div The	vect Address:  w Filing Section vision of Corporations of Centre of Tallahassee  15 N. Monroe Street Su	ite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### **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: Wildflower Enterprises, 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.
First organized, formed or incorporated under the laws of Delaware  (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
01/26/2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Wildflower Enterprises, 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 day of	re 20 <b>24</b> .		
Signature of Authorized Representative			
Signature of Authorized Representative: Printed Name: Raymond T. Hyer, Jr.	May merel 7 Anuf Title: Manager	_	
	s Entity: [See below for required signature(s)]		
Signature:	Title: Manager	_	
Printed Name:	Title:	<del></del>	
Signature:			
Printed Name:	Title:		
Signature:	Title:	A SE	٠.
Printed Name:	Title:	100	
Printed Name:	Title:		
Signature:		7:43	
Printed Name:	Title:	<del>-</del>	
If Florida Corporation: Signature of Chairman, Vice Chairman, Di If Directors or Officers have not been selec			
If Florida General Partnership or Limit Signature of one General Partner.	ed Liability Partnership:		
If Florida Limited Partnership or Limite Signatures of ALL General Partners.	ed Liability Limited Partnership:		
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)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Wildflower Ente			
	(Must contain the words "Limited Lie	ability Company, "L.L.C" or "LLC.")	
ARTICLE II	- Address:		
The mailing ac	ldress and street address of th	e principal office of the Limito	ed Liability Company is:
Principal Offi	ce Address:	Mailing Address:	
750 Gulf Bouley	vard	750 Gulf Boulevard	
Belleair Shores	, FL 33786	Belleair Shores, FL 33786	<u> </u>
	h an active Florida registration.)	egistered Agent. You must designate an	individual or another
The name and	the Florida street address of t	he registered agent are:	2024 AUG
The name and	the Florida street address of the Dax Nelson, P.A.	he registered agent are:	individual or another
The name and	the Florida street address of the Dax Nelson, P.A.  N. 2309 S. MacDill Avenue, S.	he registered agent are: ame Suite 102	2024 AUG
The name and	the Florida street address of the Dax Nelson, P.A.  N. 2309 S. MacDill Avenue, S. Florida street address (I	he registered agent are:	2024 AUG
The name and	the Florida street address of the Dax Nelson, P.A.  No. 2309 S. MacDill Avenue, S. Florida street address (I. Tampa	he registered agent are: ame Suite 102	2024 AUG
The name and	the Florida street address of the Dax Nelson, P.A.  N. 2309 S. MacDill Avenue, S. Florida street address (I	he registered agent are:  ame  Suite 102  P.O. Box NOT acceptable)	2024 AUG

(CONTINUED)

Registered Agent's Signature (REQUIRED)

	IN'	4.4	1		٠,		,
A	K,		<b>.</b>	١. ١	٠.	ı١	· -

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	D 17.11
MGR	Raymond T. Hyer, Jr.
	750 Gulf Boulevard
	Belleair Shores, FL 33786
<del></del>	
	A STATE OF THE STA
(Use attachment if necessary)	
(Use attachment if necessary)	7:4
•	7:43
(Use attachment if necessary)  LE V: Other provisions, if any.	7:43
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LE V: Other provisions, if any,  REQUIRED SIGNATURE:	7:43
LE V: Other provisions, if any,  REQUIRED SIGNATURE:	7:43
LE V: Other provisions, if any.	7:43
LE V: Other provisions. if any.  REQUIRED SIGNATURE:  Play mend	2 Hyer Jr.
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance.	r an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am aware
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance any false information submitted in a document any false information submitted in a document is executed.	r an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am aware
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance.	Thy In authorized representative of a member

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)