# L24000392228

(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:	
W24000109989 payment found in our records on 09/12/2 (W24000126526)	
our records on 09/12/21   (W24000126526)	1

Office Use Only



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#### **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.

I. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: YUN FEI ORLANDO REALTY PA
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
12/01/2016
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
YUNFEI LIU LLC
(Enter Name of Florida Limited Liability Company)  4. If not effective on the date of filing, enter the effective date: 7/31/2024.  (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 $\underline{Q}$ day of $\underline{J}\mathcal{U}(\underline{\gamma})$	_20 <u>24</u>			
Signature of Authorized Representative of Limit	ed Liability Company:			
Signature of Authorized Representative:  Printed Name: YUNTELLIC	Title: <u>Person</u> in charge	<del>.</del>		
Signature(s) on behalf of Other Business Entity: [				
Signature: Yunfei Liu				
Printed Name: Yunfei Liu	Title: 1erson in Charge			
Signature:Printed Name:	_ Title:			
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 <u>ALL</u> General Partners.	y Limited Partnership:		2024 SEP	** 1
All others: Signature of an authorized person.		17.00 17.00	EP 12	
Fees:			PH I:	Į.
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	A PE	1:43	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

YUNFEI LIU LLC	Must contain the words "Limited Lia	ibility Company, "L.L.C" o	r "LLC.")
ARTICLE II - A	Addmongs		
		e principal office of th	ne Limited Liability Company is:
n : : 1.05°	4.11		, , ,
Principal Office	: Address:	Mailing Addres	<u>ss:</u>
751 Fordingbridge	e Way	751 Fordingbridg	ge Way
Osprey, FL 34229	<u> </u>	Osprey, FL 3422	9
	YUNFEI LIU		<del></del>
	N.	ame	<del></del>
	751 Fordingbridge Way		
	Florida street address (	P.O. Box <u>NOT</u> accept	table)
	Osprey	FL <sup>34229</sup>	
	F 7		
	City	Zip	
	City	Zip	
	City named as registered agent ar	Zip  and to accept service of	
liability con	City named as registered agent ar npany at the place designate	Zip nd to accept service of d in this certificate, I h	hereby accept the appointment as
liability con registered agei	City named as registered agent ar npany at the place designate nt and agree to act in this ca	Zip nd to accept service of d in this certificate, 14 pacity. I further agree	hereby accept the appointment as to comply with the provisions of
liability con registered agei statutes relat	City named as registered agent an npany at the place designate nt and agree to act in this ca ing to the proper and comple	Zip  Id to accept service of  Id in this certificate, 1 h  pacity. I further agree  te performance of my	hereby accept the appointment as to comply with the provisions of
liability con registered agei statutes relat	City named as registered agent an npany at the place designate nt and agree to act in this ca ing to the proper and comple	Zip  Id to accept service of  Id in this certificate, 1 h  pacity. I further agree  te performance of my	hereby accept the appointment as to comply with the provisions of duties, and I am familiar with and rovided for in Chapter 605, F.S
liability con registered agei statutes relat	City named as registered agent an npany at the place designate nt and agree to act in this ca ing to the proper and comple	Zip  Id to accept service of  Id in this certificate, 1 h  pacity. I further agree  te performance of my	e to comply with the provisions of duties, and I am familiar with and rovided for in Chapter 605, F.S
liability con registered agei statutes relat	City  named as registered agent ar  npany at the place designate  nt and agree to act in this ca  ing to the proper and comple  obligations of my position as	Zip  Id to accept service of  Id in this certificate, 1 h  pacity. I further agree  te performance of my	hereby accept the appointment as a to comply with the provisions of duties, and I am familiar with and rovided for in Chapter 605, F.S
liability con registered agei statutes relat	City  named as registered agent ar  npany at the place designate  nt and agree to act in this ca  ing to the proper and comple  obligations of my position as	Zip  Indito accept service of  India this certificate, I had  pacity. I further agree  It performance of my  It registered agent as parts.	hereby accept the appointment as a to comply with the provisions of duties, and I am familiar with an avoided for in Chapter 605, F.S
liability con registered ager statutes relat	City  named as registered agent ar  npany at the place designate  nt and agree to act in this ca  ing to the proper and comple  obligations of my position as  Registered Agent's S	Zip  Indito accept service of the din this certificate. If the pacity. I further agree the performance of my the registered agent as property of the performance of t	hereby accept the appointment as to comply with the provisions of duties, and I am familiar with and rovided for in Chapter 605, F.S
liability con registered ager statutes relat	City  named as registered agent ar  npany at the place designate  nt and agree to act in this ca  ing to the proper and comple  obligations of my position as  Registered Agent's S	Zip  Indito accept service of  India this certificate, I had  pacity. I further agree  It performance of my  It registered agent as parts.	hereby accept the appointment as a to comply with the provisions of duties, and I am familiar with an avoided for in Chapter 605, F.S

ARTICLE IV-

8 2 2 34 2 Sept 1

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	
AMBR	YUNFEILIU
<del></del>	751 Fordingbridge Way
	Osprey, FL 34229
(Use attachment if necessary)	
LE V: Other provisions, if any.	7024 ST
	<u></u>
	<u> </u>
	[],
REQUIRED SIGNATURE:	三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、
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Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

Filing Fees

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)