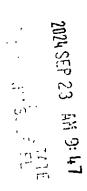
0114804000HI

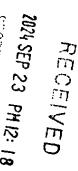
(Requestor's Name)
(Address)
	Address)
,	
(City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



800432731528







115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	09/23/2024	_				
	Patrice Rus	sh				
	e #:250191					
Entity Nar	me: IN	ISPIRED B	Y WATER, LLC	;	.′	202
☐ Art ☐ Am ☐ Ch ☐ Re ☑ Co	icles of Incorporation/A nendment ange of Agent instatement nversion				A CONSTRUCTION OF THE CONS	2024-SEP 23 AN 9: 47
☐ Dis	rger solution/Withdrawal titious Name					
Authorize Signature	() M	150.00				

F: +852.2682.9790



00/00/0004

115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	09/23/2024		
Name:	Patrice Rush		
Reference #:	2501912		
		RED BY WATER, LLC	
☐ Article ☐ Amend ☐ Chang	s of Incorporation/Authoriz	ation to Transact Business	2024 SEP 23 FM 9: 47
Fictitio			
Authorized A	mount: \$150.00		

F: 800.944.6607

COVER LETTER

то:	New Filing Section Division of Corporations					
	•					
SUB	HECT: Inspired By Water, LLC (Name of Resulting Florida Li	imited ('omnany)			
	(Manie of Resulting Florida El	milea	ompany)			
	nclosed Articles of Conversion, Articles of Organizess Entity" into a "Florida Limited Liability Compa					i "Other
Pleas	e return all correspondence concerning this matter t	o:				
Sara Pa	ge H. Waugh, Authorized Representative of Diana Worth Dowd , Member and Man	ager		TALL SALL SALL	2024 St	
	(Contact Person)				-0 -0	erman:
Moore	e & Van Allen PLLC			Š-	ယ်	
	(Firm/Company)				==	
100 N	I. Tryon St., Suite 4700			1957:	ۻ	
	(Address)			一二二	L 7	
Charl	otte, NC 28202					
	(City, State and Zip Code)					
E-1	mail Address: (to be used for future annual report notifications	s)				
For fi	orther information concerning this matter, please ca	II:				
Sata Page	R. Waugh, Authorized Representative of Shannon C. Lifty. Member and Manager. at (704) 33	11-3635 Daytime Telephone Nu			
	(Name of Contact Person) (Area Co	ode) (E	Daytime Telephone Nu	ımber)		
	sed is a check for the following amount: (All checks and drawn on a bank located in the United States)	•	essed by this office	e must be p	ayable	in US
(\$25 fc & \$12	50,00 Filing Fees		S IS 185,00 Filing Certified Copy, a Certificate of Sta	ind		
	Mailing Address: New Filing Section Division of Corporations P.O. Box 6327	Nev Div	eet Address: w Filing Section vision of Corporation			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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.

Inspired By Water, LLC (Enter Name of Other Business Entity)	-	-	SE	1 H
•		<i>:</i>	ري م	
The "Other Business Entity" is a			$\boldsymbol{\omega}$	
(Enter entity type. Example: corporation, limited partnership, general p	partnership, comm	on law	or Husin	ress trukt, etc
First organized, formed or incorporated under the laws of		:: 1155	9: 1	
(Enter state, or if a n	non-U.S. entity, the	е กลียาเ	of the o	ountry)
August 23, 2023	·	•		· vainiyy
(date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the				
(date of organization, formation or incorporation)				
(date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the				
(date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the Inspired By Water, LLC	e attached Art			

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 19 day of September	_ 20 <u>_ 24</u>
C' (A A A A A A A A A A A A A A A A A A A	
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Wiana	Nowd
Printed Name: Diana Worth Dowd	Title: Manager
Charles (a) and ball of College Design on Parish of	Control of the contro
Signature(s) on behalf of Other Business Entity:	
Signature: Niana Worth Dowd Printed Name: Diana Worth Dowd	
Printed Name: Diana Worth Dowd	Title: Manager
Signature:Printed Name:	Title
Three Name.	792
Signature:	
Printed Name:	Title: 17 23
Signature:	
Printed Name:	
-	ာ်ရ ဖ
Signature:	77.7
Signature: Printed Name: Signature: Printed Name: Signature: Printed Name:	
Signature:	
Printed Name:	Title:
If Ulasida Componition.	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Co.	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:
Signature of one General's arther.	
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
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

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Musi contain	the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and st	reet address of the	principal office of the Limited Liability Comp	any is:
Principal Office Address:	<u>.</u>	Mailing Address:	
700 North Perry Avenue		700 North Perry Avenue	
Jupiter, FL 33458		Jupiter, FL 33458	
		- 5	
•	ida registration.)	[1] [7]	
The name and the Florida s	_	م این	5
The name and the Florida s	street address of th	c registered agent are:	5
The name and the Florida s	street address of th	c registered agent are:	j
The name and the Florida s Diana V 700 No	street address of th Worth Dowd Na rth Perry Avenue	c registered agent are:	j
The name and the Florida s Diana V	street address of th Worth Dowd Na rth Perry Avenue	e registered agent are:	Ö
The name and the Florida s Diana V 700 No Florid	street address of th Worth Dowd Na rth Perry Avenue	c registered agent are:	

Registered Agent's Signature (REQUIRED)

Diana Doud

liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of a 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)

4	D	TI			117
-	м		1 1	I a F.	1 7 -

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	B: W # B .
MGR	Diana Worth Dowd
	700 North Perry Avenue
	Jupiter, FL 33458
	
	<u> </u>
	<u> </u>
(Use attachment if necessary)	
(350 4444),	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Diana Doud	
y o norma y o trem	
Signature of a member or	an authorized representative of a member
	e with section 605.0203 (1) (b), Florida Statutes. I am aware t
This document is executed in accordance	
any false information submitted in a docu	iment to the Department of State constitutes a third degree fel
This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	iment to the Department of State constitutes a third degree fel
any false information submitted in a docu	iment to the Department of State constitutes a third degree fel
any false information submitted in a docu as provided for in s.817.155, F.S. Diana Worth Dowd, Member	ment to the Department of State constitutes a third degree felo yped or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)