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(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:





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COVER LETTER

TO: New Filing Section		
Division of Corporations		
SUBJECT: Weather Tested LLC		
(Name of Ro	sulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Articles Entity" into a "Florida Limited L	•	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	ng this matter to:	
Gregory Avis		
(Contact Person)		
Weather Tested LLC		
(Firm/Company)		
27186 Saint Andrews Avenue		
(Address)		
Wesley Chapel, Florida, 33544		
(City, State and Zip Code)		
greg@weathertestedllc.com		
E-mail Address: (to be used for future annual re	eport notifications)	
For further information concerning this ma	atter, please call:	
Gregory Avis	at (⁸⁵⁶	₈ 889-2967
(Name of Contact Person)	 	(Daytime Telephone Number)
Enclosed is a check for the following amo dollars and drawn on a bank located in the	•	rocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop	<u> </u>
Mailing Address:		Street Address:
New Filing Section Division of Corporations		New Filing Section Division of Corporations
P.O. Box 6327		The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassec, FL 32303

Tallahassee, FL 32314

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: Weather Tested LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limitied Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
05/29/2023 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
Weather Tested 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 afte
the date this document is filed by the Florida Department of State.)
<u>Note:</u> 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 3rd day of October	20 24
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Gregory Avis	Title: Owner
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: Gregory Avis	
Printed Name: Gregory Avis	Title: Owner
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	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
Alt others: Signature of an authorized person.	·
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$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	y is:
Weather Tested LLC.	ability Company, "L.L.C.," or "LLC.")
(Musi contain the words) Entitled Ex	aomity Company, E.E.C., Of EEC.)
ARTICLE II - Address:	
the maning address and street address of th	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
27186 Saint Andrews Avenue	27186 Saint Andrews Avenue
Wesley Chapel, Florida, 33544	Wesley Chapel, Florida, 33544
	ered Office, & Registered Agent's Signature: tegistered Agent. You must designate an individual or another
The name and the Florida street address of t	he registered agent are:
Gregory Avis	
N	ame
27186 Saint Andrews Ave	nue
Florida street address (P.O. Box NOT acceptable)
Wesley Chapel	FL 33544
City	Zip
liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and comple	nd to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as epacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and s registered agent as provided for in Chapter 605, F.S
Registered Agent's S	Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

If A B A D D II — A siddle mineral B A small and	
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Gregory Avis
AMBIC	27186 Saint Andrews Avenue
	Wesley Chapel ,Florida, 33544
(I I	
(Use attachment if necessary)	
(Ose attachment if necessary)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of	r an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	e with section 605.0203 (1) (b). Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a doc	e with section 605.0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	e with section 605.0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document of the submitted in a d	ee with section 605.0203 (1) (b). Florida Statutes. I am aware the ument to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S. Gregory Avis	r an authorized representative of a member re with section 605.0203 (1) (b). Florida Statutes. I am aware the the degree felocation of State constitutes a third degree felocation of the Department of State constitutes a third degree felocation of the Department of State constitutes a third degree felocation of the Department of State constitutes a third degree felocation of the Department of State constitutes a third degree felocation of the Department of State constitutes a third degree felocation of the Department of State constitutes as the Department of

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)