# 124000467907

(Requestor's Name)
(Address)
(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.

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.

1. The name of the Other Business Entity immediately prior to the filing of the Articles of Conversion is:
Upside Search UC (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on <u>June 29, 2021</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Upside Search UC (Enter Name of Florida Limited Liability Company)
(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.

2011 OCT 15 FH 4:31

Signed this Monday day of September 30 20 24 Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: 1) Lew Fector
Printed Name: Drew Fector
Title: Founder + Managing Partner Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: / Jew Fecke Title: Founder > Managing Partner Signature: Signature: Michael Fecko Title: Managing Partier Signature: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Title: Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL 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)

\$5.00 (Optional)

Certificate of Status:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Upside	e Search LL	Company, "L.L.C.," or "LLC.")	
(Must co	ontain the words "Limited Liability	Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addre			
The mailing address ar	nd street address of the pr	incipal office of the Limited Liability Cor	npany is:
Principal Office Add	ress:	Mailing Address:	
5350 Bridge	St., Unit 1402	5350 Bridge St., Unit 1	102
5350 Bridge St., Unit 1402 Tempa, FL 33611		Tampa, FL 33611	
ARTICLE III - Regis	stered Agent, Registered	Office, & Registered Agent's Signature	e:
(The Limited Liability Compa- business entity with an active	any cannot serve as its own Regist e Florida registration.) rida street address of the r		e: er
The Limited Liability Compa business entity with an active	any cannot serve as its own Regist e Florida registration.) rida street address of the r	ered Agent. You must designate an individual or anothe	e: r
(The Limited Liability Compa- business entity with an active	any cannot serve as its own Regist e Florida registration.)	ered Agent. You must designate an individual or anothe	e: r
(The Limited Liability Compa- business entity with an active The name and the Flor	iny cannot serve as its own Register Florida registration.)  rida street address of the registration Fecter Name	ered Agent. You must designate an individual or anothe egistered agent are:	e: er
(The Limited Liability Compa- business entity with an active The name and the Flor	any cannot serve as its own Regist e Florida registration.) rida street address of the r	ered Agent. You must designate an individual or anothe egistered agent are:	e: er
The Limited Liability Compabusiness entity with an active The name and the Flor	iny cannot serve as its own Register Florida registration.)  ida street address of the registration Fector Name  5350 Bridge S-Ilorida street address (P.O.)	ered Agent. You must designate an individual or another egistered agent are:  beet Unit 1402 Box NOT acceptable)	e: er
(The Limited Liability Compabusiness entity with an active The name and the Flor	iny cannot serve as its own Register Florida registration.)  rida street address of the registration Fecter Name	ered Agent. You must designate an individual or another egistered agent are:  beet Unit 1402 Box NOT acceptable)	e: er

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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

1

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBA	Drew Fecks
	5350 Bridge St. Unit 1402
	Tampa, FL 33611
A., 4.2. 0	21 1 7 1
AMBR	2345 SW 28 D Terrace
	Cape Coral FL 33914
	_ cyc com, Fe )) iii
<u></u>	
(Use attachment if necessary)	
SEE W. Oden and delicate 18 and	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Drew Je	
- new fe	dev
Signature of a member or	r an authorized representative of a member to with section 605.0203 (1) (b), Florida Statutes, I am aware the
any false information submitted in a doc	ce with section 605.0203 (1) (6), Fronda Statutes. I am aware tr ument to the Department of State constitutes a third degree felo
as provided for in \$ \$17,155, F.S.	· ·
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	yped or printed name of signce Filing Fees
I.	yped of printed name of signee
	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)