L24000467935

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





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SCORETARY OF STATE
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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:

Einpresswigs & Binales Routique Inc. (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter state, or if a non-U.S. entity, the name of the country)
on 4/13/2034 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
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 a steel 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 10 day of 28th	20_24			
Signature of Authorized Representative of Lim	ited Liability Company:			
Signature of Authorized Representative: Printed Name: Latoya Morton	17 10/201 Title: 10/2013034	_		
Signature(s) on behalf of Other Business Entity:				
Signature: My Motton Printed Name: My Motton	Title: 10/28/2024	- -		
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 In		īALI SE	2024	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:	UHE DIRY LAHASSE	10CT 31	<u> </u>
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	OF STATE	AM 7:47	
All others: Signature of an authorized person.		<u> </u>	47	
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	:
AKTIULET - Name	:

The name of the Limited Liability Company is:

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
1317 Edgewerter Dr # 7391 Orkado FL 32804	4751 N PIREHIUS Rd #10

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are: Florida street address (P.O. Box NOT acceptable)

Having been named as registered agent and to accept service of process for the above stated limited 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 all 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..

Registered Agent's Signature (REQUIRED)

Limon Woodburn

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
	
MC D	
MGK	CICKUGO FC 33808 CICKUGO FC 33808 CICKUGO FC 33808
AMBR	CHOYC Marton
	Grando FL 32008
	202
(Use attachment if necessary)	SELIKE IA
TICLE V: Other provisions, if any.	31 AM
	<u> </u>
Λ	
REQUIRED SIGNATURE:	
Signature of a member or a	an authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, I am aware that nent to the Department of State constitutes a third degree felony
as provided for in s.817.155, F.S.	deni to the Department of State constitutes a third degree felony
Tyr	ped or 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)