L24000468060

(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:
W24000141023 11/01/24

Office Use Only

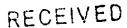


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FLORIDA DEPARTMENT OF STATE SECRETARY STATE SECRETARY STATE Division of Corporations

October 15, 2024

DEREK GIGANTI 3000 NE 2ND AVE #810 MIAMI, FL 33137 US

SUBJECT: DEREK MITCHELL SITE LLC

Ref. Number: W24000141023

We have received your document for DEREK MITCHELL SITE LLC and check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is all limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Monique K Anderson Regulatory Specialist II

Letter Number: 724A00022757

DI AM THE ONLY OWNER MOMBER PARTNER
OF THIS ZLC EXCEPT FOR ROYER
SUDICE?.

www.sunbiz.org

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on 8.29.2011 = IN - 45-3140551 (date of organization, formation or incorporation) Ny. STATE I.D. # 4136022
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
DEREKMITCHELLSITELLC
(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 mount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 2 day of OCTOBER	<u> </u>			
Signature of Authorized Representative of Lipsi	ted Liability Company:			
Signature of Authorized Representative. Printed Name DEREK 6 60-17	Title: Presinent onner			
Signature(s) on behalf of Other Business Entity:	/ [See below for required signature(s)]			
Signature: DEREK GIEANTI	_ Title: _ DWNER CHAIRMAN PRRSIDET			
Cianatura: POGGG	Title: VICE PIESIDENT			
	•			
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. corporator must sign.			
If Florida General Partnership or Limited Liabilit	y Partnership:			
Signature of one General Partner.		=		
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	SECREL TALLAHA	2024 NOV	7
All others:		ISS)	1	<u></u>
Signature of an authorized person.			➣	ŗr:
Fees:		STATE	AM 7: 38	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	75	8	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:
The name of the Limited Liability Company is:
DEREKMITCHELLSITELLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address: DLO MODELSS
3000 NE 2 re Ave (SAMC) FLO3 12 te Ave Brooking, N. Miami, FL 33137
Mismi, FL 33137
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:
POYER SUAREZ Name
3000 NE 2nd Ave #810
Florida street address (P.O. Box NOT acceptable)
Miami FL 33137
Miami FL 33137 City Zip
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)
$(CONTINUED) \qquad \qquad \Box \stackrel{\circ}{\Box} \qquad \Box \stackrel{\circ}{\Box}$

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

<u>Title:</u> "AMBR" = Authorized Member "MCP" = Manager	Name and Address:	
"MGR" = Manager		
 		
		
	7p. 21	
(Use attachment if necessary)	ALLAHA	
	NAME OF THE PARTY	
CLE V: Other provisions, if any.	SSET 1	
		—
	DR.	_
REQUIRED SIGNATURE:	DE 38	
La La	eleef S	
Sizzatum et e en :		
any false information submitted in a docum	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony	
as provided for in s.817.155, F.S.	Au ===	

Typed 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)