L24000 484041

(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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09/24/24--01012--018 **180.00



COVER LETTER

TO: New Filing Section			
Division of Corporations			
SUBJECT: CONVEYSION Champ of Re	Inc to LLC esulting Florida Limited Company)	_	
(Name of Re	satung Fiorida Limited Company)		
	cles of Organization, and fees are submitted to ciability Company" in accordance with s. 605.1		her
Please return all correspondence concernir	ng this matter to:		
Vanela Cakes (Firm/Company)			
(Contact Person)			
Vanela Cares		-1° 20	
(Firm/Company)		24 A	
Hayela Cakes (Firm/Company) 2111 5. French Ave. (Address)		2024 NOV 15 AM 10: 18	
(Address)		15 18	
Sanford FL 32771 (City, State and Zip Code)	ļ	ci mi: A∰	F
(City, State and Zip Code)			
	ח	NIE C	
Vûnelacakes @ amail. co. E-mail Address: (to be used for future annual re	eport notifications)	~	
For further information concerning this ma			
	-		
Lymaris Kanirez	at (954) 937 - 3527 (Area Code) (Daytime Telephone Number)		
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	-	
Enclosed is a check for the following amoundlars and drawn on a bank located in the	unt: (All checks processed by this office must b United States)	e payable in US	S
اس.	,		
☐ \$150.00 Filing Fees ☐ \$155.00 Filing Fees			
(\$25 for Conversion and Certificate of & \$125 for Articles Status	and Certified Copy Certified Copy, and Certificate of Status		
of Organization)	Certificate of Status		
Mailing Address:	Street Address:		
New Filing Section	New Filing Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		

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 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: Vanela Cakes Inc. P24000049662
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation (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 July 28, 2024 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Vanela Cakes
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: $\frac{5p+.75-2024}{2024}$. (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.



Signed this 8 day of November	20_24
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Lyman's Genires	Rand
Signature(s) on behalf of Other Business Entity:	
Signature: Lant Printed Name: Sorge E. Lamirez	Title: VP
U	
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 a If Directors or Officers have not been selected, an Ind	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

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

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Vanela Cakes LLC	
(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	s:
Principal Office Address: Mailing Address:	
2111 S. French Ave Sanford Fl. 32771 Sanford FL 32771	
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:	
Lymaris Ramirez Name	
Name	
2111 S. French Ave St	
Florida street address (P.O. Box <u>NOT</u> acceptable)	1
Sandond FL 3277/ City Zip	
City Zip	
Having been named as registered agent and to accept service of process for the above stated limit 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 statutes relating to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S	: Fall
Registered Agent's Signature (REQUIRED)	
(CONTINUED)	
FLATE 18	7

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	Line is Remises	
MGR./	Lyman's Raminez	•
	Orlando FL 32924	
AMBR JUP	Jorge E Ramirez 1911 Colonial Woods Blud Ovlando FL 32826	
	Wiendo FL 32826	
		
	702H	
(Use attachment if necessary)	TALLAHAS	
	0. •	(Fra
ARTICLE V: Other provisions, if any.	AM 10	
		
REQUIRED SIGNATURE:		
· · · Xex and	Jon V	
Signature of a member or ar	n authorized representative of a member ith section 605.0203 (1) (b), Florida Statutes. I am aware that	

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Famires Jorge F Ramires
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)