LZ4000484663



(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer.

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COVER LETTER

TO: New Filing Section Division of Corporati	ons			
SUBJECT: GROUP MILLER		II.C		
SUBJECT: GROOF MILECER		lting Florida Lir	nited Con	npany)
	ida Limited Lia	bility Compa	ny" in a	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
rease return an corresponde	nee concerning	uns matter to	•	
DARREN MILLER				
(Conta	ct Person)			
(Firm/	Company)			
12351 CANAL GRANDE DR				
(Ac	ddress)			
FORT MYERS, FL 33913				
(City, State	and Zip Code)			
DARRENMILLER@SBCGLOB	AL.NET			
E-mail Address: (to be used for	future annual repo	ort notifications)		
For further information conce	eming this matt	er, please call	:	
DARREN MILLER		at (<u>312</u>	758-8	3989
(Name of Contact Person		(Area Cod	c) (Day	time Telephone Number)
Enclosed is a check for the fo dollars and drawn on a bank			process	sed by this office must be payable in US
	00 Filing Fees tificate of	☐\$180.00 Filir and Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporation P.O. Box 6327	ons		New I Divisi	Address: Filing Section on of Corporations Fentre of Tallahassee
Tallahacee FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

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: GROUP MILLER INVESTMENTS, ELC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of ILLINOIS
(Enter state, or if a non-U.S. entity, the name of the country)
on JULY 28, 2022
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
GROUP MILLER INVESTMENTS, 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 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 6TH day of NOVEMBER	<u> 70 24 . </u>				
Signature of Authorized Representative of Limited Liability Company:					
Signature of Authorized Representative: Printed Name: DARREN MILLER	title: MANAGER				
Signature(s) on behalf of Other Business Entity: See below for required signature(s)					
Signature: Printed Name: DARREN MILLER					
Printed Name: DARREN MILLER	Title: MANAGER				
•					
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	Officer.				
If Directors or Officers have not been selected, an Inc	corporator must sign.				
If Florida General Partnership or Limited Liabilit	y Partnershio:				
Signature of one General Partner.					
MCFlorida, I tracked Process and track and track and tracked to the contract of					
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)				
Certificate of Status:	\$5.00 (Optional)				

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan	ne:				
The name of the Li	mited Liability Company	ris:			
GROUP MILLER IN					
(Mu	st contain the words "Limited Lia	bility Company, "L.L.C.," or "L1	.C.")		
ARTICLE II - Ad	dress:				
The mailing address	s and street address of the	e principal office of the L	imited Liability Company is:		
Principal Office A	ddress:	Mailing Address:			
12351 CANAL GRANDE DR		12351 CANAL GRAN	12351 CANAL GRANDE DR		
FORT MYERS, FL 3	3913	FORT MYERS, FL 33	3913		
· · · · · · · · · · · · · · · · · · ·		-			
business entity with an a	ompany cannot serve as its own Rective Florida registration.) Florida street address of the DARREN MILLER	egistered Agent. You must design ne registered agent are:	ate an individual or another		
	N	ame			
	12351 CANAL GRANDE	OR			
	Florida street address (P.O. Box NOT acceptable)				
	FORT MYERS	FL ³³⁹¹³			
	City	Zip			
liability compo registered agent o statutes relating	any at the place designate and agree to act in this cap to the proper and completigations of my position as	d in this certificate. Therei pacity. I further agree to c ye performance of my duti	cess for the above stated limited by accept the appointment as comply with the provisions of all ies, and I am familiar with and ded for in Chapter 605, F.S		

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	DARREN MILLER
 	12351 CANAL GRANDE DR
	FORT MYERS, FL 33913
	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
$\overline{}$	
	11-11-11-11-11-11-11-11-11-11-11-11-11-

Signature of a member or an authorized representative of a member

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.

DARREN MILLER

REQUIRED SIGNATURE

ARTIC

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)