L24000490173

(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:





600439539796

11/13/24--01027--010 ++150.00

ALLAHASSEE, FLORIDA

124 NOV 19 AM 7: 2

COVER LETTER

TO: New Filing : Division of	Section Corporations			
SUBJECT: Finance	Generation LLC			
	(Name of Re	sulting Florida Limi	ted Comp	pany)
				fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all cor	respondence concernin	g this matter to:		
Tyler Payne				
	(Contact Person)		-	
Finance Generation L	LC			
	(Firm/Company)	•	-	
4950 W Prescott St U	INIT 3316			
	(Address)		-	
Tampa, FL 33616				
	(City, State and Zip Code)		-	
tyler@financegenerat	ion.com			
E-mail Address: (to	be used for future annual re	port notifications)	-	
For further informat	tion concerning this ma	tter, please call:		
Tyler Payne		·	,41879a	24
(Name of Con	taat Darcan)	_at (714	_)	ime Telephone Number)
(Name of Con	tact i erson)	(Area Code	i (Dayu	me Telephone (Number)
	for the following amount a bank located in the		processe	ed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		□\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Add				Address:
New Filing !				iling Section
Division of 6 P.O. Box 63	Corporations			on of Corporations entre of Tallahassee
1.0. DON 0.3	- /		THE CC	THE OF FRIIDINGSEE

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.

(Enter Name of Other n	Susiness Entity)
2. The "Other Business Entity" is a limited liability of	ompany ted partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the la	California WS of (Enter state, or if a non-U.S. entity, the name of the country)
	(Enter state, or if a non-U.S. entity, the name of the country)
on 10/14/2022 (date of organization, formation or incorporation)	
(date of organization, formation or incorporation)	
•	any as set forth in the attached Articles of Organization:
•	any as set forth in the attached Articles of Organization:
3. The name of the Florida Limited Liability Comp	
3. The name of the Florida Limited Liability Comp	Liability Company)

- 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 13th	day of November	20 24
Signature of Auth	orized Representative of Lim	ited Liability Company:
Cimatum of Author	rivad Dammanativa	wax
Printed Name:Tyler	rized Representative:	Title: Owner
Signature(s) on bel	half of Other Business Entity:	[See below for required signature(s)]
Signature:	Lux	
Printed Name: Tyler	Payne	Title: Owner
Signature:		Title:
Printed Name:		TRIE;
Signature:		
Printed Name:	<u>-</u>	Title:
C:		
Printed Name:	·	Title:
rimed Name		
Signature:		
Printed Name:		Title:
Signaturo:		
Printed Name:		Title:
<u></u>		
If Florida Corpora		
	an, Vice Chairman, Director, or ers have not been selected, an Ir	
ii Directors or Offic	ers have not been selected, an a	ecorporator must sign.
	Partnership or Limited Liabil	ity Partnership:
Signature of one Ge	neral Partner.	
TO Triumbala, I familianal	Donas a a markin a a 1 (m. is a 1 (m. k))	ion I fanisani Danomanahina
	Partnership or Limited Liabil General Partners.	
All others:		
Signature of an auth	orized person.	
<u>Fees:</u>		
Articles of C	Conversion:	\$25.00
Fees for Flo	orida Articles of Organization:	\$125.00
Certified Co		\$30.00 (Optional)
Certificate of	of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Cor	npany is:
Finance Generation LLC	
(Must contain the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is
The mailing address and street address Principal Office Address:	of the principal office of the Limited Liability Company is Mailing Address:
Principal Office Address:	
	Mailing Address:

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:

Tyler Payne		
	Name	-
4950 W Prescott S	St UNIT 3316	
Florida street a	ddress (P.O. Box	(NOT acceptable)
Tampa		FL ³³⁶¹⁶
C	ity	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. Thereby 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)

ART	Γ	Ľ.	IV
AKI		. ľ.	1 V -

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

"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Tyler Payne
AWDI	4950 W Prescott St UNIT 3316
	Tampa, FL 33616
	Tampa, 1 C 00010
MGR	Tyler Payne
	4950 W Prescott St UNIT 3316
	Tampa, FL 33616
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member of	or an authorized representative of a member
Signature of a member of This document is executed in accordar any false information submitted in a do	nce with section 605.0203 (1) (b), Florida Statutes. I am aware th
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	nce with section 605.0203 (1) (b), Florida Statutes. I am aware th
Signature of a member of This document is executed in accordar any false information submitted in a do as provided for in s.817.155, F.S.	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am aware the ocument to the Department of State constitutes a third degree felo
Signature of a member of This document is executed in accordar any false information submitted in a do as provided for in s.817.155, F.S. Tyler Payne	nce with section 605.0203 (1) (b), Florida Statutes. I am aware th

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, Ph.D., California Secretary of State, hereby certify:

Entity Name: Finance Generation LLC

Entity No.: 202252913516 **Registration Date:** 10/14/2022

Entity Type: Limited Liability Company - CA

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF. I execute this certificate and affix the Great Seal of the State of California this day of October 29, 2024.

SHIRLEY N. WEBER, PH.D. Secretary of State

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Certificate No.: 261008619

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.