24000492175

(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:
W24000146232 11/22/24

Office Use Only



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TI III



October 28, 2024

AMELIA JONES 7543 OSEOLA POLK LINE ROAD DAVENPORT, FL 33896 US

SUBJECT: GREYBLOCK GAMES LLC

Ref. Number: W24000146232

We have received your document for GREYBLOCK GAMES 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):

The printed name and signature on behalf of the "Other Business Entity" that is located in Idaho is missing from the document. Please place the printed name and signature on the designated lines located on page 2

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: 524A00023717

RECEIVED 024NOV 22 PM 1: 1 2024 NOV 22 AM 1: 32

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" imme Greyblock Games LLC	ediately prior to the	filing of the Articl	es of Conve	rsion is:
(Enter Name of Other	r Business Entity)		.•	
2. The "Other Business Entity" is a				
(Enter entity type. Example: corporation, lin	mited partnership, gener	ral partnership, commo	n law or busin	ess trust, etc.)
First organized, formed or incorporated under the	laws of			
	(Enter state, or i	f a non-U.S. entity, the	name of the co	ountry)
11/28/2022 on				
(date of organization, formation or incorporation)				
3. The name of the Florida Limited Liability Con	nnany as set forth ir	the attached Arti	cles of Orga	nization
Greyblock Games LLC	ipany as sec form in	i die attached Al fi	cies of Orga	mzanon.
(Enter Name of Florida Limite	d Liability Company)		•	
4. If not effective on the date of filing, enter the e	ffective date:	_		
(The effective date: Cannot be prior to date of a the date this document is filed by the Florida D. Note: If the date inserted in this block does not meet the ap document's effective date on the Department of State's reco	receipt or filed date Department of State plicable statutory filing	e.)		-
5. The plan of conversion has been approved in ac		= =	2024 TALL	
6. The "Converted or Other Business Entity" has ag which such members are entitled under ss. 605.10	reed to pay any mem 006 and 605.1061-60	nbers having apprais 05.1072, F.S.	NO 22 AM 1: 32	amount to

Signed this 7th	day of August	20 <u> 24</u>			
Signature of Authoriz	ed Representative of Limi	ited Liability Company:			
Signature of Authorized Printed Name: Amelia Jor	d Representative:	Title: President			
		[See below for required signature(s))]		
Printed Name: A PA	ullafenes		<u>-</u> -	4	_
Signature:Printed Name:	<u> </u>	Title:	<u> </u>		
Signature:Printed Name:		Title:	_		
Signature:Printed Name:		Title:	<u> </u>		
Signature: Printed Name:		Title:	<u> </u>		
Signature:Printed Name:		Title:	_		
If Florida Corporation: Signature of Chairman, V If Directors or Officers h	: Vice Chairman, Director, or (ave not been selected, an Ind	Officer. corporator must sign.			
If Florida General Part Signature of one General	<u>nership or Limited Liabilit</u> Partner.	ty Partnership:			
If Florida Limited Parts Signatures of <u>ALL</u> Gene	nership or Limited Liabilit ral Partners.	y Limited Partnership:	野on	202	
All others: Signature of an authorize	d person.		LAHASSEE FLORID	2024 NOV 22	-13
Fees:			3.7.05.8		["i"]
Articles of Conv Fees for Florida Certified Copy: Certificate of Sta	Articles of Organization:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	LORIDA LORIDA	AM 1: 32	\bigcirc

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Greyblock Games LLC		
(Must contain the words "Limited Liabilit	y Company, "L.L.C" or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the pr	rincipal office of the Limited	d Liability Company is
Principal Office Address:	Mailing Address:	
7543 Osceola Pol Line Road	7543 Osceola Pol Line Roa	d
Davenport, FL 33896	Davenport, FL 33896	 -
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Age ered Agent. You must designate an i	nt's Signature:
The name and the Florida street address of the re	egistered agent are:	202 /
Amelia Jones		A NO
Name		2024 NOV 22 SI KLIMANI ALLAHASSEI
7543 Osceola Pol Line Road		[1]-
Florida street address (P.O.	Box NOT acceptable)	
Davenport	FL 33896	AH 1: 33
City	Zip	» "
Having been named as registered agent and to		

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.

(CONTINUED)

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

Title: "AMBR" = Authorized Member "MCR" = Newses	Name and Address:
"MGR" = Manager MGR	Amelia Jones 7543 Osceola Pol Line Road Davenport, FL 33896
(Use attachment if necessary)	
LE V: Other provisions, if any.	ZUZĄ NUY TALLAHA
	SSE F
REQUIRED SIGNATURE:	LORIDA
√ \ \	an authorized representative of a member
Signature of a member of a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree fe
This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. Amelia Jones	with section 605,0203 (1) (b) Florida Statutes, Lam aware to