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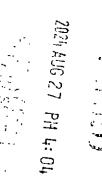
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Document Number)
,
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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Office Use Only



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#### **COVER LETTER**

TO: New Filing Se Division of C				
SUBJECT:	Deal Da	Atting Florida Limited Com	npany)	
The enclosed Articles Business Entity" into	s of Conversion, Articl a "Florida Limited Li	les of Organization, an ability Company" in a	d fees are submitted to co ecordance with s. 605.10	onvert an "Other 45, F.S.
Please return all corre	espondence concerning	g this matter to:		
Anthor Deal	(Contact Person)	) C		
7 Meca	(Address)	C+		
adow	55a, FL City, State and Zip Code) 0970	34446 201.com		20
	e used for future annual re on concerning this ma			1024 AUG 27
Anthony (Name of Conta	Dowa	at (856 ) 7	263-/940 rtime Telephone Number)	327 PH
	for the following amou a bank located in the		sed by this office must be	~ .
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add New Filing S			t Address: Filing Section	

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

INHS11 (7/17)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

### **Articles of Conversion** For

# "Other Business Entity"

Into

## Florida Limited Liability Company

The Articles of Conversion and attached				
"Other Business Entity" into a Florida L	Limited Liability	Company in accordar	ice with \$.602.11	Mar Liouda.
Statutès.			7.1.3	, F479
				Ö
1. The name of the "Other Business Entity  Appliances  (Enter Name	"immediately pr Delivec	ior to the filing of the	Articles of Conv	er <del>si</del> on is:
(Enter Name	of Other Business E	ntity)		
2. The "Other Business Entity" is a (Enter entity type. Example: corpor	ration, limited partne	Liability rship, general partnership, o	common law or busi	iness trust, etc.)
First organized, formed or incorporated un	der the laws of(Ente	r state, or if a non-U.S. enti	Jersey ity, the name of the	country)
on Z-4-2020 (date of organization, formation or incorporation)	on)			
3. The name of the Florida Limited Liabil:	ity Company as s	et forth in the attached	l Articles of Or	ganization:
Deal Days (Enter Name of Florid	LLC		·	
(Enter Name of Florid	da Limited Liability	Company)		
4. If not effective on the date of filing, ent	ter the effective d	ate: 6-2 -20	24	
(The effective date: Cannot be prior to d	late of receipt or	med date nor more t	han 90 calendai	r days after
the date this document is filed by the Flo	orida Departme	at of State.)		
Note: If the date inserted in this block does not me		utory filing requirements, t	his date will not be	listed as the
document's effective date on the Department of Sta	ate's records.			
5. The plan of conversion has been approv	ed in accordance	with all applicable stat	utes.	

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.

2 day of Sune 20 24 lignature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative . \_ Conthonis Printed Name: Anthony Down Tillor Signature(s) on behalt of Other Business Entity: [See below for required signature(s)] Printed Name. Printed Name \_\_\_\_\_\_ Printed Name \_\_\_\_\_ Printed Name Signature Title: Printed Name:\_\_\_ If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: \$25.00

Articles of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Organization:

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Deal Days LLC	•
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7 Mosning Glosy Ct Homososses, FL 34446	7 Morning Glory Ct Homosesse, FL 34446
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
Judy L. Smith	gistered agent are:
918 N Suncos	
Florida street address (P.O.	Box NOT acceptable)
Crystal Bruer City	FL 34429
City	Zip

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Down Glory Ct FL 34446
<u></u>
2024
W6 27
PH +
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n
ative of a member Florida Statutes. I am aware that e constitutes a third degree felony
ence
Ē

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-