12400518006

(Re	questor's Name)	
76.0	dress)	
(Adi	ui css)	
(Add	dress)	· · ·
,	•	
(City	y/State/Zip/Phone	e #)
☐ PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



400440712864

12/10/24--01029--015 **185.00

24 DEC 10 PM12: 41

SNOTTARY OF STATE

COVER LETTER

Division of Corporations		
SUBJECT: 4 Elbows, LLC		
	of Resulting Florida Limit	ed Company)
		on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence conc	erning this matter to:	
Andrew Goldman		
(Contact Person)		
4 Elbows, LLC		
(Firm/Company)		
4906 Carova Way		
(Address)		
Lakewood Ranch, Florida 34211		
(City, State and Zip C	Code)	
jamie@4elbows.com		
E-mail Address: (to be used for future and	nual report notifications)	
For further information concerning th	is matter, please call:	
Jamie Goldman	at (⁹¹⁷	204-8912
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located in		rocessed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing and Certificate of Status		
Mailing Address:		Street Address:
New Filing Section		New Filing Section
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
rananassa, rasas ra		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: 4 Elbows, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited partnership (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
October 5, 2005 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: 4 Elbows, 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.

24 DEC 10 PHI2: LI

PILONG TARY OF STATE

Signed this 29th	day of November	20
Signature of Auth	orized Representative of Limi	ted Liability Company:
Signature of Author	rized Representative:	
Printed Name: Andre	ew Goldman	Title: Partner
Signature(s) on bel	nalf of Other Business Entity:	See below for required signature(s)
	666	L-
Signature:	w Goldman	Title: Partner
rinted Name: Andre	W Goldman	Title: Fattiei
Signature:		
Printed Name: Prisci	lla Goldman	Title: Partner
Printed Name:		Title:
Cianatura:		
		Title:
Timed Name	-	
Signature:		
Printed Name:		Title:
Signature:		Dat 1
Printed Name:		Title:
If Florida Corpora	tion:	
	an, Vice Chairman, Director, or	Officer.
	ers have not been selected, an In	
	Partnership or Limited Liabili	ty Partnership:
Signature of one Ge	neral Partner.	
If Florida Limited	Partnership or Limited Liabili	ty Limited Partnership
Signatures of ALL		ty Edinted Partnersing.
organical est of TEEE	onoral Farmons.	
All others:		
Signature of an auth	orized person.	
Fees:		
Aminlan - Co	Convenien:	ድንሩ ሰለ
Articles of C	•	\$25.00 \$125.00
Certified Co	orida Articles of Organization:	-
Certificate of	• -	\$30.00 (Optional) \$5.00 (Optional)
Certificate (a Dialus.	45.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
4 Elbows, 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 of	ffice of the Limited Liability Company is:		
Principal Office Address: Mailin	g Address:		
4906 Carova Way 4906 C	arova Way		
Lakewood Ranch, Florida 34211 Lakewo	ood Ranch, Florida 34211		
The name and the Florida street address of the registered Andrew Goldman Name	agent are:		
4906 Carova Way			
Florida street address (P.O. Box NC	Florida street address (P.O. Box NOT acceptable)		
Lakewood Ranch FL 3	4211		
City	Zip		
Having been named as registered agent and to accept so liability company at the place designated in this cert registered agent and agree to act in this capacity. I furt statutes relating to the proper and complete performant accept the obligations of my position as registered a Registered Agent's Signature (R.)	ificate, I hereby accept the appointment as her agree to comply with the provisions of all accept my duties, and I am familiar with and agent as provided 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 AMBR	Andrew Goldman	
	4906 Carova Way	·
	Lakewood Ranch, Fl 34211	
AMBR	Priscilla Goldman	
	4906 Carova Way	
	Lakewood Ranch, Fl 34211	
	-	DEC
		10
		 }]
		PM 12: 41
		—— 🤥 😤
(Use attachment if necessary)		
(334 4144511116111 11 11 11 11 11 11 11 11 11 11 1		WILL WATIONS
RTICLE V: Other provisions, if any.		
		
		
REQUIRED SIGNATURE:		
——————————————————————————————————————	· .	
fride at Co		

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 faise information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.

Andrew Goldman

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)