# 124000527399

(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:
on 12/18/24 top notify Annual
Broot ncz 4

Office Use Only



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T.J.H 4/21/24

## **COVER LETTER**

Division of C						
SUBJECT:	Bishops Home (Name of Res	e SCYV. Ce	5 Zz ed Con	(C		
				nd fees are submitted to con ecordance with s. 605,1045		Other
Please return all corre	espondence concerning	g this matter to:				
Bishops Hor	(Contact Person)		-			
1225 Roxbo	(Firm/Company)					
longwood f.	(Address)  Z 32750  City, State and Zip Code)		-		SECRE	2024 DEC 19
	e services Ogn e used for future annual re					-0
For further information	on concerning this ma	tter, please call:				ვ ლ
(Name of Conta	et Person)	at ( <u>&amp;&amp;</u> (Area Code)	) <u>30</u> (Day	time Telephone Number)		0
	or the following amou a bank located in the		roces	sed by this office must be p	ayable in	uS
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status		
Mailing Address: New Filing Section Division of Corporations			New Divis	t Address: Filing Section ion of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 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. 605,31045,210 rida
Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liabilite 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
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Bisheps Home Sesuices UC (Enter Name of Florida Limited Liability Company)
(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.

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Con-	ipany is:	
Bishars Hame (Must contain the words "Limit	SESVICES LLC ited Liability Company, "L.L.C.," or "L.L.C.,")	
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Cor	mpany is:
Principal Office Address:	Mailing Address:	
1225 Rexbox Rd Lengwood FL 32750	Same	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	egistered Office, & Registered Agent's Signatur own Registered Agent. You must designate an individual or another	r <b>e:</b> ut
The name and the Florida street address	i i i i i i i i i i i i i i i i i i i	2021
Josiah 12	Name ARR	2024 DEC 19
1225 RoxA		¥
	ress (P.O. Box NOT acceptable)	PH S:
<i>Lang Model</i> City	FI. 32950 Zip	$\frac{\omega}{\omega}$

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Signed this 474 day of April	20 <u>_<b>2</b>4</u>		
Signature of Authorized Representative of Limi	ited Liability Company:		
Signature of Authorized Representative: Joseph Printed Name: Sosian 13/Shap	Title: Leo		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)		
Signature: Signature: Signature: Sosiah Bistop	_ Title:CO		
Signature: Printed Name:			
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 Officers have not been selected, an Inc.		2024 DEC SECRETA TALLAHAL	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	DEC 19	1
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	tv Limited Partnership:	PH 5:	( Times
All others: Signature of an authorized person.		©# <b>3</b>	
Fees:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25,00 \$125,00 \$30,00 (Optional) \$5,00 (Optional)		

## ARTICLE IV-

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

Name and Address:		
Table Die		
Josiah Bishop		
1225 Rexbora Rd		
Long Wood FL 32750		
Juson Bisnes		
Camming GA 30040		
Falso Bicano		
1775 Boxh-ya Rd		
(charact 1/ 3)750		
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in authorized representative of a memb	er 	
with section 605,0205 (1) (b), Fiorida Statutes. Latent to the Department of State constitutes a third (	m aware u degree fek	m NV
	<u></u>	•
	Jos, ah Bishep  1205 Rexbeve Rd  Lengwood FL 32750  Jeson Bishep  5960 Shannan Dr  Camming Gh 30000  Joshua Bishep  1205 Rexbeve Rd  Lengwood FL 32750  an authorized representative of a membroith section 605,0203 (1) (b). Florida Statutes, I a lent to the Department of State constitutes a third of the section 605.0203 (1) (c).	Josiah Bisher  1225 Rexbero Rd  Longwood Fi 32750  Justine Bisher  Cumming GA 30000  Jos Rexbero Rd  Longwood Fi 32750  Alternation of 32750  Alternation of 32750

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)