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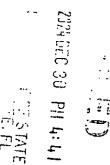
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(530,1000 2,111, 1,101,10)
(Document Number)
Certified Copies Certificates of Status
Consisting at the Constitution of the Constitu
Special Instructions to Filing Officer:
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Office Use Only



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# COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: GABRIELLA KOVALENKO	LLC	
	ulting Florida Limited Cor	mpany)
The enclosed Articles of Conversion, Articl Business Entity" into a "Florida Limited Lie		
Please return all correspondence concerning	g this matter to:	
Gabriella Kovalenko		
(Contact Person)	<del></del>	
Gabriella Kovalenko LLC		
(Firm/Company)		
7912 Lois Mae Ct.		
(Address)		
Orlando, FL 32818		
(City. State and Zip Code)		
gabi@gabikovalenko.com		
1:-mail Address: (to be used for future annual re	port notifications)	
For further information concerning this ma	tter, please call:	
Gabriella Kovalenko	_at ( <u>609-401-09</u> 23	
(Name of Contact Person)	(Area Code) (Da	ytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the		ssed by this office must be payable in US
S150.00 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 Address:		et Address:
New Filing Section Division of Corporations		Filing Section sion of Corporations
Common or Corporations	DIVIS	aton or corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street. Suite 810

P.O. Box 6327

Tallahassee, FL 32314

# 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" immediately prior to the filing of the Articles of Conv GABRIELLA KOVALENKO LLC	ersion i	ís:
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a Limited Liability Company	~	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or busi		st. etc.)
First organized, formed or incorporated under the laws of New Jersey  (Enter state, or if a non-U.S. entity, the name of the	)     	- 
(Enter state, or if a non-U.S. entity, the name of the	comit.	
12/27/2021	<u> </u>	
(date of organization, formation or incorporation)	÷:	المنطقة
on \frac{12/27/2021}{\text{(date of organization, formation or incorporation)}}  7. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization.	ga <b>rī</b> iza!	tion:
GABRIELLA KOVALENKO 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 the date this document is filed by the Florida Department of State.)	- days :	after
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listed as	the
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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	e amou	int to

Signed this 2 day of <u>D</u>	ecember	20_24		
Signature of Authorized Repr	esentative of Limi	ted Liability Company:		
Signature of Authorized Repres Printed Name: <u>Gabriella Kovale</u>	entative: <b>John</b>	Title: Member	_	
Signature(s) on behalf of Other	Business Entity:	[See below for required signature(s)]		
Signature: Jahulla Ko	Varalanta	Title: Member	_	
			_	
Printed Name:		Title: Member	<del>-</del> -	
		Title: <del>Momber</del>	_	
			_	
Printed Name:		Title: <del>Mombor-</del>	- -	2012
Signature:Printed Name:		Title: Member	_	2024 520 2
				(C)
Printed Name:		Title: Member	- (n <sub>eo</sub>	PM I
If Florida Corporation: Signature of Chairman, Vice Chair If Directors or Officers have not	airman, Director, or been selected, an In-	Officer. corporator must sign.	FILE	4:42
If Florida General Partnership Signature of one General Partner	or Limited Liabili	ty Partnership:		
If Florida Limited Partnership Signatures of <u>ALL</u> General Partnership	or Limited Liabili ners.	ty Limited Partnership:		
All others: Signature of an authorized perso	n.			
Fees:				
Articles of Conversion: Fees for Florida Article: Certified Copy: Certificate of Status:	s of Organization:	\$25.00 \$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:	
GABRIELLA KOVALENKO LLC (Must contain the words "Limited Liability	Company #1.1.C. You #1.1.C.Yo
(Must contain the words) Comited Clabinty	Company, L.L.C., or Cl.C.)
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7901 4th St N STE 300 St. Petersburg FL 33702	7901 4th St N STE 300 St. Petersburg FL 33702
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature; red Agent. You must designate an individual of anothers
The name and the Florida street address of the re	gistered agent are:
Registered Agents Inc	30
Name	
7901 4th St N STE 300	Box NOT accentable)
Florida street address (P.O.	Box NOT acceptable)
St. Petersburg	FLFL
City	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. 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)

#### ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	Gabriella Kovalenko	<del></del>	
	7912 Lois Mae Ct.	<u></u>	
	Orlando, FL 32818		
Member	Gabriella Kovalenko		
	7901 4th St N STE 300		
	St. Petersburg FL 33702		
			707
Member	Gabriella Kovalenko	•	
	7901 4th St N STE 300		. c
	St. Petersburg FL 33702		
	<u>0                                  </u>		- (
(Use attachment if necessary)			
(Osc attachment if ficeessary)		1-17	
		<del>-1</del>	
CLT V. Cub		근목	
CLE V: Other provisions, if any.		ليا	
	· · · · · · · · · · · · · · · · · · ·	<del></del>	
REQUIRED SIGNATURE:			
KEQUIKED SIGNATURE.			
9/41 11/21/4/			
- Housey may			-
~.	r an authorized representative of a n		

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Gabriella Kovalenko

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)