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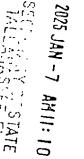
(Req	uestor's Name)	
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Name	e)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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FILED

#### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Monty Lane LLC	
(Name o	f Resulting Florida Limited Company)
	articles of Organization, and fees are submitted to convert an "Other d Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concer	ming this matter to:
Amelia Kilgo	
(Contact Person)	· · · · · · · · · · · · · · · · · · ·
(Firm/Company)	<del></del>
610 Earl Ave. N (Address)	
St Petersburg, FL 33701	
(City, State and Zip Co Amy@ajrealtyteam.com	de)
E-mail Address: (to be used for future annu	al report notifications)
For further information concerning this	matter, please call:
Jeff Monahan	at ( <sup>734</sup> ) 476-9133
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following a dollars and drawn on a bank located in	mount: (All checks processed by this office must be payable in US the United States)
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fe and Certificate of Status	es
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address:  New Filing Section  Division of Corporations  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810  Tallahassee, FL 32303

#### **Articles of Conversion**

For

#### "Other Business Entity"

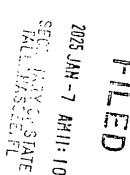
Into

### Florida Limited Liability Company

The Articles of Conversion <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 Conversion is:  Monty Lane LLC
(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 business trust. etc.)
(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)
September 25, 2023
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the <b>attached Articles of Organization</b> :  Monty Lane 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.



Signed this 19th day of December	2024 .
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Amelia Kilgo	Lia Kilse Title: CEO
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Omolio Kilgo Printed Name: Amelia Kilgo	_ Title: CEO
Signature: Printed Name:	
Signature:Printed Name:	
Signature:Printed Name:	
Signature:Printed Name:	
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.  If Florida General Partnership or Limited Liability Signature of one General Partner.	corporator must sign.
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
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)

TOTAL TO MALL: 10

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compan	y is:	
Monty Lane LLC		
(Must contain the words "Limited L	iability Company, "L.L.C.," or "L.LC.")	
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limit	ed Liability Company is:
Principal Office Address:	<b>Mailing Address:</b>	
610 Earl Ave N.	610 Earl Ave N.	
St. Petersburg FL 33701	St Petersburg FL 33701	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	Registered Agent. You must designate as	
	rog.s.rou agom are.	
Amelia Kilgo	Name	
610 Earl Ave. N.		
<del></del>	(P.O. Box NOT acceptable)	
St Petersburg	FL <sup>33701</sup>	
City	Zip	
	ted in this certificate, I hereby a apacity. I further agree to comp lete performance of my duties, a as registered agent as provided	ccept the appointment as ply with the provisions of all and I am familiar with and

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Amelia Kilgo
	610 Earl Ave. N
	St Petersburg FL 33701
	<del></del>
<del></del>	
	<u> </u>
(Use attachment if necessary)	
	(, (
LE V: Other provisions, if any.	
LE V. Other provisions, it any.	
REQUIRED SIGNATURE:	
_ Amelia K	
Signature of a member or o	an authorized converentative of a member
	in authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am
any false information submitted in a docum	nent to the Department of State constitutes a third deg
as provided for in s.817.155, F.S.	
Amelia Kilgo	
	oed or printed name of signee
Туј	sed of printed name of signee

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

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