L25000346840

(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:





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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.

Statutes.	
1. The name of the "Other Business Entity" immediately prior to the filing of the Article ADVANCED LAND MANAGEMENT, LLC	es of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	n law or business trust, etc.)
First organized, formed or incorporated under the laws of Ohio (Enter state, or if a non-U.S. entity, the	name of the country)
on 09/28/2017 (date of organization, formation or incorporation)	manie or the country,
3. The name of the Florida Limited Liability Company as set forth in the attached Artic ADVANCED LAND MANAGEMENT, LLC	cles of Organization:
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 9 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 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 apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	sal rights the amount to MALLACTOR THE SECTION (CERTIFICATION)

	Signed this 8th day of July	2025	
	Signature of Authorized Representative of Limi		
У	Signature of Authorized Representative: MICHAEL DAVIES		IANAGER
	Signature(s) on behalf of Other Business Entity:	See below f	or required signature(s)]
X	Signature: ML D. Printed Name: MICHAEL DAVIES	Title:	MANAGER
	Signature:Printed Name:	Title:	
	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 If Directors or Officers have not been selected, an Inc.	Officer. corporator m	ust sign.
	If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partners	hip:
	If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited I	Partnership:
	All others: Signature of an authorized person.		
	<u>Fees:</u>		
	Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (O \$5.00 (Op	

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ARTICLES OF ORGANIZATION FO	OR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Comp	any is:
ADVANCED LAND MANAGEME	NT, LLC
(Must contain the words "Limited	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
511 BAYSHORE DRIVE	511 BAYSHORE DRIVE
OSPREY, FL 34229	OSPREY, FL 34229
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address of MICHAEL DA	•
	····

Na	ime
511 BAYSHORE	DRIVE
Florida street address (F	P.O. Box NOT acceptable)
OSPREY	FL 34229
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-

Title:

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

Name and Address:

MGR	MICHAEL DAVIES
	511 BAYSHORE DRIVE
	OSPREY, FL 34229
CEO	DYLAN HOWARTH
	511 BAYSHORE DRIVE
	OSPREY, FL 34229
	
·····	
(Use attachment if necessary)	
LE V: Other provisions, if any	r,
	
DEMIIDED SIGNATUDE.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
<u> </u>	
Signature of a mem This document is executed in ac	ther or an authorized representative of a member.
Signature of a mem This document is executed in ac	ther or an authorized representative of a member- cordance with section 605.0203 (1) (b), Florida Statutes. I am awar in a document to the Department of State constitutes a third degree
Signature of a mem This document is executed in ac any false information submitted i	ober or an authorized representative of a member cordance with section 605.0203 (1) (b), Florida Statutes. I am awar in a document to the Department of State constitutes a third degree
Signature of a mem This document is executed in ac any false information submitted i as provided for in s.817.155, F.S	ther or an authorized representative of a member. cordance with section 605.0203 (1) (b), Florida Statutes. I am awar in a document to the Department of State constitutes a third degree ES Typed or printed name of signee
Signature of a mem This document is executed in ac any false information submitted i as provided for in s.817.155, F.S MICHAEL DAVI	ther or an authorized representative of a member cordance with section 605.0203 (1) (b), Florida Statutes. I am awar in a document to the Department of State constitutes a third degree is.