L25000464319

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	f)
PICK-UP	WAIT	MAIL MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer.	

Office Use Only



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10/02/25--01030--020 **155.00

September 17, 2025

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Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

RE: 100 Harvard Avenue, LLC

To Whom It May Concern:

Enclosed with this letter please find the following:

- Articles of Conversion to domesticate a Limited Liability Company into Florida.
- 2. A check for \$155 for the Filing Fee and Certified Copy.
- 3. A pre-addressed envelope.

Please file and return the certificate to me in the enclosed envelope. If you have any questions or concerns regarding this filing please email me at <u>ra@andersonadvisors.com</u> or call me at 800-706-4741.

Sincerely yours,

Morgan Winkler Authorized Representative

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 Artic 100 Harvard Avenue, LLC	les of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Limited Liability	-
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	on law or business trust, etc.)
First organized, formed or incorporated under the laws of	e name of the country)
10/18/2022 on	•
(date of organization, formation or incorporation)	
 The name of the Florida Limited Liability Company as set forth in the attached Art 100 Harvard Avenue, LLC 	icles of Organization:
(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 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.	
 The "Converted or Other Business Entity" has agreed to pay any members having apprai which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	sal rights the amount to
	:

Signed this _	day of September	20_25
Signature of	Authorized Representative	of Limited Liability Company:
Signature of	Authorized Representatives	Mongary V. mici
Printed Name	: Morgan Winkler	Title: Authorized Representative
-		Entity: [See below for required signature(s)]
Signature: _	1 Jester of Marine	Title: Authorized Representative
Printed Name	:: Morgan Winkler	Title: Authorized Representative
Signature:		
Printed Name		Title:
Signature:		
Printed Name		Title:
Signature: Printed Name		Title:
Signature:		Title:
Printed Name		Title:
Signature:		
Printed Name	<u> </u>	Title:
If Florida Co	orporation:	
Signature of C	Chairman, Vice Chairman, Dirc	
If Directors o	r Officers have not been selecte	ed, an Incorporator must sign.
<u>If Florida Ge</u>	eneral Partnership or Limited	Liability Partnership:
Signature of o	one General Partner.	
	mited Partnership or Limited ALL General Partners.	Liability Limited Partnership:
All others:	in authorized person.	
Digitature (ii t	m audiorized person.	
Fees:		
Articl	les of Conversion:	\$25.00
	for Florida Articles of Organiz	
	Ted Copy: Teate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Certii	wate or status.	טטייב (Opuonat)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:			
The name of the Limited L	iability Company is:		
100 Harvard Avenue, LLC			
(Must contain)	the words "Limited Liability	y Company, "L.L.C.," or "LLC	2")
ARTICLE II - Address: The mailing address and str	reet address of the pr	incipal office of the Li	mited Liability Company is:
Principal Office Address:		Mailing Address:	
3225 McLeod Dr. Suite 100			
Las Vegas, NV 89121			
(The Limited Liability Company carbusiness entity with an active Flori The name and the Florida s	da registration.)	egistered agent are:	te an individual or another
Allderso	Name		_
	Fwiggs Street, Suite 11	,	<u> </u>
riona	a street address (P.O	. Box <u>NOT</u> acceptable)
Tampa		FL 33602	_
	City	Zip	
liability company at the registered agent and agree statutes relating to the paccept the obligations	e place designated in we to act in this capac proper and complete p of my position as reg	this certificate, I herebity. I further agree to coperformance of my dutical distered agent as provid	ess for the above stated limited y accept the appointment as omply with the provisions of all es, and I am familiar with and led for in Chapter 605, F.S
Reg	gistered Agent's Sign	ature (REQUIRED)	

(CONTINUED)

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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	lana Kasaahaya Lanas		
MGR	Jana Korcekova-Lopez 3225 McLeod Dr. Suite 100		_
	Las Vegas, NV 89121		_
	Las Vegas, IVV 09121		_
MGR	John A. Lopez Sr.		
	3225 McLeod Dr. Suite 100		-
	Las Vegas, NV 89121		_
			_
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			_
			_
(Use attachment if necessary)			
DELCT EXT As a second of the			
RTICLE V: Other provisions, if any.			
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			2019.5 DC 1
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REQUIRED SIGNATURE:			`-
	and A law		1 1
t jes	igant Ninker	r	_ <u>ਸ਼</u> ੶
·			
Signature of a member or a	an authorized representative of a me	mber .	Σ,
This document is executed in accordance	with section 605.0203 (1) (b). Florida Statutes.	Lam aware	that
any false information submitted in a docum as provided for in s.817,155, F.S.	ment to the Department of State constitutes a thi	rd degree fe	lonv
Morgan Winkler			
	ped 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)