

(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.		
W34000153331		

Office Use Only



COVER LETTER

TO: New Filing Section Division of Corporations		,. .		
SUBJECT: (& D ENTL!	Prises OF PENSACULA	IN	C_	
Name of F	Resulting Florida Profit Corporation	/		
The enclosed Articles of Conversion, Articles of entity into a "Florida Profit Corporation" in acco		ert the fol	lowing	eligible
Please return all correspondence concerning this	matter to:			
DAULD GELB Contact Person				
Contact Person				
Firm/Company				
6258 NOV7HW ST Address	(ttl]		12	
PENSOCOLA, FC 32. City, State and Zip Code	505		A011 4303	ور دست پا
			9	
E-mail address: (to be used for future annu			₽; l;:	7 -4 729 1 -4 729 1 -4 729
For further information concerning this matter, p			03	
DAVIO GELB Name of Contact Person	at (850) 375 - 9098 Area Code and Daytime Telephone ?			
Enclosed is a check for the following amount:	Area Code and Daytine Perephone :	· ·		
\$105.00 Filing Fees \$\sigma\$\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing Fees and Certified Copy Certified Copy, 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, Su Tallahassee, FL 32303	nite 810		

Articles of Conversion

For

Converting Eligible Entity

Into

Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
1+0 FITHETS LLC (L20000112160)
Enter Name of the Converting Entity
2. The converting entity is a LINITED LIPERICITY CONPANY (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of FLORIOR (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on 04/24/2020
Enter date "Converting Entity" was first organized, formed or incorporated (1)
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> : L + D L ATTREASTS OF PENSIONE TWO. Enter Name of Florida Profit Corporation
Effect Name of Profita Front Corporation
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.
5. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to nor more than 90 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.

Signed this 14 th day of Cr70	£1/	<u>1-</u>
Required Signature for Florida Profit Co		
Signature of Director, Officer, or, if Director		in Incorporator:
Printed Name: Driver (Se CB Ti	ile: SECTEDY	
Required Signature(s) on behalf of Convecompanies: [See below for required signature]	erting Florida partnerships, limited (
Signature:		
Printed Name: DAUS GELR	Title: SCCCTA:	· <u>/</u>
Signature:		
Printed Name: LANGEN Con	Title: PRELITIENT	<u> </u>
Signature:		
Printed Name:		
Signature:		$P \rightarrow \mathbb{R}$
Printed Name:		SSET PH
Signature:		,
Printed Name:	Title:	11 6.3
Signature:		
Printed Name:	Title;	
If Florida General Partnership or Limite Signature of one General Partner.	ed Liability Partnership:	·
If Florida Limited Partnership or Limite Signatures of ALL General Partners.	ed Liability Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Repr	esentative.	
All others: Signature of an authorized person.		•
Fees: Articles of Conversion: Fees for Florida Articles of Incorpe Certified Copy: Certificate of Status:	\$35.00 oration: \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

th combinance with conf	7
ARTICLE I NAME The name of the corporation shall be: 1 + D L	ENTERPRISTS OF PENSAROUR INC
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
6258 NOTH W STIERT	Spat
PENSACOUR FL 32505	
ARTICLE III PURPOSE	
C 1: 1 de la control is organizaci is	
ANYTHING LEGAL	110 THE STATE OF FLANDE
	5
	T Ar
ARTICLE IV SHARES	
The number of shares of stock is:	
ARTICLE V OFFICERS AND/OR DIRECT	ORS CONTINUE
Name and Title LAHELL COPE	Name and Title: DAVIO GELR SECTETRILY
1260 N = 141 ST	COST Address 6200 HOLTH W STEET
Address: 6 2 8 140218 40 27	Name and Title: DAVID GELB SECRETARY 100 Address: 6258 NOTH V STEET 1 PORT Address: PORTOGER FL 32565
PENSACOLATE 3750	10 Historia 3
Name and Title:	
	A 4 Jun 101
Address:	
Name and Title:	A TWO
	A 11
Address:	

The <u>name</u>	e and Florida street address (P.O. Box NOT acceptate	ole) of the registered agent is:
Name:	DAVID GELB	
Address:	6258 NOTHIW STREET	
	6258 NOTHW STEET PEASMEDIN FL 32505	
	•	

Having b this certif	peen named as registered agent to accept service of proficate, I am familiar with and accept the appointment	ocess for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
X	le Cent	10/23/2024
	Required Signature/Registered Agent	Date

ARTICLE VI REGISTERED AGENT

IN WITNESS WHEREOF, The first party has signed and sealed these presents the day and year first above written, sealed and delivered in the presence of:

) andely		2
Landell Cade		024 A
Signed, sealed and delivered	in our presence:	2021 MOV -6 PIJ 4:
<i>Xuyle Set</i> Witness Signature	<u>Κανια Θεισ</u> Print Name	ų: 03 ,
Witness Signature	<u>0AV10 GELB</u> Print Name	

P24000070413

1 andell Cade 6250 North W Street Pensacola, FL 32505 (850) 776-1452

AFFIDAYIT

1. Landell Cade, being placed under oath, swear or affirm as follows:

- 1. I am a resident of Escambia County, in the State of Florida.
- 2. I am the president of L & D Enterprises of Pensacola, Inc.
- 3. This corporation was Admin Dissolved For Annual Report on September 27, 2024
- 4. I have no intention to utilize this corporation in the future.
- I understand that I am swearing and affirming under oath to the truthfulness of the claim made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated 11/15/3024

Landall Cade