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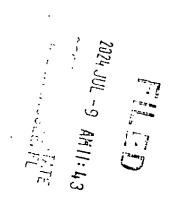
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: 66/24 /24
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Articles 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.

- 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 14	day of <u>May 2024</u>	20 <u>24</u>
Signature of A	authorized Representative of Lin	nited Liability Company:
G	uthorized Representative: 🖄🕥	Green Brings
Signature of Au	uthorized Representative: 1/1/14	SERVICE Marries
Printed Name: K	Kimberle Cannon Barton	Title: Owner Member
Signature(s) or	n behalf of Other Business Entity:	See below for required signature(s)
Signature:	Indouse Broton	Title: CAZOYE MYGODEC
Printed Name:	Kimbert Boden	Title: CARRY MYMONY
Signature:		
Printed Name:_		Title:
Signature:		Title:
rimen Name:_	· · ·	Auc.
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:_		Title:
61 mm		
Signature: Printed Name: _		Title:
Thuca Name.		Title.
if Florida Corj	mention:	
	demar Vice Christon Director o	្រប់ពីស្រ
P. Durchornor C	Who as have not been a lected and	ryorporator mar happi
	<u>eral Partnership or Limited Liabi</u>	lity Partnership:
Signature of one	e General Partner.	
15 171		Professional Company
	ited Partnership or Limited Liabi LL General Partners.	nty Limited Partnership:
Signatures of A	1313 General Partners.	
All others:		
	authorized person.	
C.	•	
Fees:		
Articles	of Conversion:	\$25.00
	r Florida Articles of Organization:	\$125.00
Certifie		\$30.00 (Optional)
	ate of Status:	\$5.00 (Optional)

Signed this 14	day of May 2024	20 <u>44</u>
Signature of Autho	orized Representative of	Limited Liability Company:
Signature of Author Printed Name: Kimbe	rized Representative: Kr erle Cannon Barton	NEOLO GOUGES Title: Owner Member
Signature(s) on beh	nalf of Other Business Enti	ity: [See below for required signature(s)]
Signature: Km	boile Borton	
Printed Name: Ki	mberle Aarton	Title: owner member
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
If Florida Corporat		
	an, Vice Chairman, Directo ers have not been selected, a	
	•	
Signature of one Ger	Partnership or Limited Li neral Partner.	ability Partnership:
FF Florido I imited l	Nautonochia a. Tiade d Y :	The Property of the State of th
Signatures of <u>ALL</u> (ability Limited Partnership:
All others:		
Signature of an author	orized person.	
Fees:		
Articles of C	Conversion:	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		IAUI
ARTICLE I - Name: The name of the Limited Liability Company is:		
KB M criga & F, LLC (Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the pri	incipal office of the Limited Liability Con	npany is:
Principal Office Address:	Mailing Address:	
755 Grand Blvd	same	
suite 105 B128		
Miramar Beach, FL 32550		
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the results of the Register Cannon Barton		•
Name		
755 Grand Blvd, Suite 105 B12	28	
Florida street address (P.O.		
Mirmar Beach	FL 32550	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete po accept the obligations of my position as regi	this certificate, I hereby accept the appoint ity. I further agree to comply with the provi performance of my duties, and I am familiar	ment as sions of all with and
Knowledge	Jos .	
Registered Agent's Signa	ature (REQUIRED)	20
(CONTINU	UED)	3

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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	Kimberle Cannon Barton
	755 Grand Blvd, Suite 105 B128
	Miramar Beach, FL 32550
	
	
	79 . : 1 .
(Use attachment if necessary)	
	: '
LE V: Other provisions, if any.	
	;
	ा क
REQUIRED SIGNATURE:	
Knowled Barbo	
Signature of a marriage	on such animal manuscrates in a figure 1.
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the
any false information submitted in a docu as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree fel
Kimberle Borton	

l yped or printed name of signe

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)