L25000008149

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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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.

(Enter Name of Other Business Entity)	_ .
2. The "Other Business Entity" is a Limited Liability Company (LLC)	
(Enter entity type. Example: corporation, limited partnership, general partnership, comm	non law or business trust, etc.)
First organized, formed or incorporated under the laws of State of Texas	
(Enter state, or if a non-U.S. entity, the	ne name of the country)
August 11, 2020 on	
(date of organization, formation or incorporation)	
2. The name of the Elevida Limited Lightlity Commons or get forth in the attached Ar	tiolog of Ozzanizations
3. The name of the Florida Limited Liability Company as set forth in the attached Ar	ticles of Organization:
Tamsynite Enterprises, LLC	<u>_</u> .
(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 d	ata will not be listed as the
document's effective date on the Department of State's records.	are will not be fisted 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	
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Signed this 22nd day of December	2024 .
Signature of Authorized Representative of Limi	ted Liability Company:
Simplified of Authorized Donogantaring Tamsyn	Strydom
Signature of Authorized Representative: Tamsyn Printed Name: Tamsyn Strydom	Title: Authorized Member
Signature(s) on behalf of Other Business Entity:	
Signature: Tamsyn Strydom Printed Name: Tamsyn Strydom	
Printed Name: Tamsyn Strydom	Title: Authorized Member
Signature:	
Printed Name:	Title:
Signatura	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title
Timed Name.	
Signature: Printed Name:	<u></u>
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili	ty Partnorchia
Signature of one General Partner.	y ratthersup.
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ALL Central Faturers.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Centificate of Status.	aJAOTODHODATI

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Tamsynite Enterprises, LLC
(Must contain the words "Limited Liability Company, "L.L.C.." or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
7901 4th Street North	7901 4th Street North
Suite 300	Suite 300
St. Petersburg, FL 33702 USA	St. Petersburg, FL 33702 USA

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Northwest Registered Age	ent, Inc
N	ame
7901 4th Street North, Sui	te 300
Florida street address (P.O. Box NOT acceptable)
St. Petersburg	FL ³³⁷⁰²
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.

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Tamsyn Strydom	
Registered Agent's Signature (REQUIRED)	

(CONTINUED)

Δ	RT	C1	.F.	IV.

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 AMBR	Tamsyn Strydom
WITCH T	7901 4th Street North, Suite 300
	St. Petersburg, FL 33702 USA
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Use attachment if necessary)	
Use attachment if necessary) J.E. V: Other provisions, if any.	
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E V: Other provisions, if any. EQUIRED SIGNATURE: Tamsyn Strydom Signature of a member of This document is executed in accordance.	r an authorized representative of a member de with section 605.0203 (1) (b), Florida Statutes. I am aware ument to the Department of State constitutes a third degree f
E V: Other provisions, if any. EQUIRED SIGNATURE: Tamsyn Strydom Signature of a member of This document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S.	ce with section 605.0203 (1) (b), Florida Statutes. I am aware
E V: Other provisions, if any. EQUIRED SIGNATURE: Tamsyn Strydom Signature of a member of this document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S. Tamsyn Strydom	ce with section 605.0203 (1) (b), Florida Statutes. I am aware