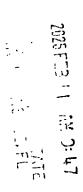
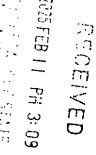
# 

(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:

Office Use Only







## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 - Tallahassee, Florida 32301 (850) 224-8870 - 1-800-342-8062 - Fax (850) 222-1222

Franchise Genesis LLC	,
Please Debit FCA000000003 For: 185	
Thank you Seth Neeley	
1.4.	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
/	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Manager Tr	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

#### COVER LETTER

	filing Son of C	ection orporations						
SUBJECT: F	- Franchis	e Genesis, LLC						
		(Name of Re	sulting Florida Lim	ited Co	mpany)			
					nd fees are submitted to accordance with s. 605.			21
Please return	all corre	espondence concernin	g this matter to:				202	
Lawrence A. S	aichek,	Esq.					2025 E.E.	;- <del></del>
		(Contact Person)		_			(i) 	
								, 
		(Firm/Company)					:	į.
4000 Ponce do	e Leon E	Blvd.		_		11 = 1		•
		(Address)				. 🖽	-1	
Coral Gables,	Fl. 3314	46						
	((	City, State and Zip Code)						
laslaw18@aol.	.com	_						
E-mail Addre	ess: (to b	e used for future annual re	port notifications)	<del></del>				
For further in	formatic	on concerning this ma	tter, please call:					
Lawrence A. S	aichek,	Esq.	at ( <u>3</u> 05	777-	-0233			
(Name	of Conta	et Person)	(Area Code	) (Da	-0233 ytime Telephone Number)			
		or the following amou a bank located in the		proces	sed by this office must	be payabl	e in US	
[] \$150.00 Filin (\$25 for Convers & \$125 for Artic of Organization)	don des	□\$155.00 Filing Fees and Certificate of Status	□\$180,00 Filing and Certified Co	_	■\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
New F Divisio P.O. B	ox 632	ection orporations		New Divis The O	Et Address: Filing Section Sion of Corporations Centre of Tallahassee N. Monroe Street, Suit	e 810		

Tallahassee, FL 32303

#### **Articles of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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 Franchise Genesis, LLC	Articles of Conversion is:
(Enter Name of Other Business Entity)	——————————————————————————————————————
The "Other Business Entity" is a Limited Liability Company  (Enter entity type. Example: corporation, limited partnership, general partnership,	
(Enter entity type. Example: corporation, limited partnership, general partnership,	, common law or business trust, etc
First organized, formed or incorporated under the laws of(Enter state, or if a non-U.S. enOctober 20, 2020	
(Enter state, or if a non-U.S. en	uity, the name of the country)
October 20, 2020	, <sup>12</sup> ; -21
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attache	ed Articles of Organization:
Franchise Genesis, LLC	
(Enter Name of Florida Limited Liability Company)	<del></del> ;
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 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, document's effective date on the Department of State's records.	this date will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable sta	ntutes.

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 3rd day of February	_ 20	
Signature of Authorized Representative of Limit	ed Liability Company:	
Signature of Authorized Representative: Nichal Printed Name: Nicholas Neonakis	olas Neonakis Title: Manager	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)}	
Signature: Nicholas Neonakis Printed Name: Nicholas Neonakis		
Printed Name: Nicholas Neonakis	_ Title: Authorized Representative	
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature: Printed Name:		. 65
Signature: Printed Name:		
Signature:Printed Name:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C If Directors or Officers have not been selected, an Inc	Officer.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	v Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> . General Partners.	v Limited Partnership:	
All others: Signature of an authorized person.		
<u>Fees:</u>		

\$25.00

\$125.00

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

Articles of Conversion:

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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Franchise Genes					
(	Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC")			
ARTICLE II					
The mailing add	ress and street address of the	e principal office of the Limited I	Jability C	ompan	y is:
Principal Office	2 Address:	Mailing Address:			
935 Bella Vista A	ve	935 Bella Vista Ave.		د ع	
Coral Gables, FL	33156	Coral Gables, FL 33156	••	127	
ARTICLE III -	Registered Agent, Registe Company cannot serve as its own R	Coral Gables, FL 33156  red Office, & Registered Agent egistered Agent. You must designate an indi			i 1
ARTICLE III - (The Limited Liability business entity with)	Registered Agent, Registe y Company cannot serve as its own R an active Florida registration.) are Florida street address of the	red Office, & Registered Agent egistered Agent. You must designate an indi			j
ARTICLE III - (The Limited Liability business entity with)	Registered Agent, Register Company cannot serve as its own Ran active Florida registration.) The Florida street address of the Nicholas Neonakis	red Office, & Registered Agent egistered Agent. You must designate an indi ne registered agent are:			j :
ARTICLE III - (The Limited Liability business entity with)	Registered Agent, Register Company cannot serve as its own Ran active Florida registration.) The Florida street address of the Nicholas Neonakis	red Office, & Registered Agent egistered Agent. You must designate an indi			j :
ARTICLE III - (The Limited Liability business entity with)	Registered Agent, Register Company cannot serve as its own Ran active Florida registration.) The Florida street address of the Nicholas Neonakis	red Office, & Registered Agent egistered Agent. You must designate an indi ne registered agent are:			j :
ARTICLE III - (The Limited Liability business entity with)	Registered Agent, Register Company cannot serve as its own Rean active Florida registration.)  Re Florida street address of the Nicholas Neonakis  No. 935 Bella Vista Ave	red Office, & Registered Agent egistered Agent. You must designate an indi ne registered agent are:			j :
ARTICLE III - (The Limited Liability business entity with)	Registered Agent, Register Company cannot serve as its own Rean active Florida registration.)  Re Florida street address of the Nicholas Neonakis  No. 935 Bella Vista Ave	red Office, & Registered Agent egistered Agent. You must designate an indine registered agent are:  ame			j :
ARTICLE III - (The Limited Liability business entity with)	Registered Agent, Register Company cannot serve as its own R an active Florida registration.)  Re Florida street address of the Nicholas Neonakis  No. 1935 Bella Vista Ave  Florida street address (I	red Office, & Registered Agent egistered Agent. You must designate an indine registered agent are:			j

Registered Agent's Signature (REQUIRED)

Nicholas Neonakis

(CONTINUED)

A	121	ľī	CI	II.	$W_{-}$

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

"MGR" = Manager		
MGR	Nicholas Neonakis	_
	935 Bella Vista Ave	_
	Coral Gables, FL 33156	_
		_
		- - 2:
		- 137
		• 5 
		– <sub>.</sub> ,
(Use attachment if necessary)	;ii. <del>[1</del> 5]	; ;
ZLE V: Other provisions, if any.	LL CL	1
THE V. Other provisions, it any.		
		-

Nicholas Neonakis

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605,0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, V.S.

Nicholas Neonakis

Typed 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)