L25000058749

(Requestor's Name)
(Address)
(Address)
(Cit. (Cit.) (Cit.) (Cit.)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W23000035430
03/27/23

Office Use Only



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SOURT TARY OF STATE





March 15, 2023

JIMMY HUCKABEE 532 SUNRISE DR ORLANDO, FL 32803 US

SUBJECT: HUCKABEE PAINTING Ref. Number: W23000035430

We have received your document for and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

If you have any further questions concerning your document, please call (850) 245-6052.

Letter Number: 823A00005990

KAIN COSTELLO Regulatory Specialist II New Filing Section

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COVER LETTER

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March 1

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Tallahassee, FL 32303

	New Filing Section Division of Corporations		need as Praint
SUBJE	CT: What Canal (Name of Resulting Florida Lin	nited Company	<u>: : : : : : : : : : : : : : : : : : : </u>
The enc Business	losed Articles of Conversion, Articles of Organiza's Entity" into a "Florida Limited Liability Compa	ation, and fed ny" in accord	es are submitted to convert an "Other dance with s. 605.1045, F.S.
Please r	· eturn all correspondence concerning this matter to	· : , ,	
50	mmy Huckabee	. · 	· ·
7	(Contact Person)		
936	2 Surise of Criando F (Address)	1	(a) - 3
(Words FL 32863 (City, State and Zip Code)	 -	
<u> </u>	Habel youth no Dydnar. (it Address: (to be used for future annual report notifications		u seri un seri
For furt	her information concerning this matter, please cal): :	
Dim	(Name of Contact Person) at (40°	le) (Daytime	59025 Telephone Number)
	d is a check for the following amount: (All checks and drawn on a bank located in the United States)	s processed t	by this office must be payable in US
(\$25 for C	00 Filing Fees	lopy Ce	\$185.00 Filing Fees, rtified Copy, and rtificate of Status
Ī	Mailing Address: New Filing Section	Street Ad New Filin	g Section
	Division of Corporations P.O. Box 6327	The Centr	of Corporations re of Tallahassee
	Fallahassee, FL 32314	2415 N. N	Monroe Street, Suite 810

Articles of Conversion

For was

"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 Lia Statutes.	ibility Compa	ny in accordance with s.605.1045, Florida
1. The name of the "Other Business Entity" immediate the Company of the Company o	Patra	e filing of the Articles of Conversion is:
(Enter Name of Other Bus	ness Entity)	
2. The "Other Business Entity" is a Corporation, limited	partnership, geno	eral partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws		if a non-U.S. entity, the name of the country)
on 6-1-2016	A Property	34 至1.5.3 20.00
(date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Compan	was sal forth in	This attached Articles of Organization:
5. The name of the Florida Enfinted Elability Compan	y as see form in	the digital ched Artheres of Organization.
- Hock-aber Daw	Hipa	uc.
(Enter Name of Florida Limited Lia	bility Company)	oughous
4. If not effective on the date of filing, enter the effec	tiva datā:	
(The effective date: Cannot be prior to date of rece		te nor more than 96 calendar days after
the date this document is filed by the Florida Depa		
Note: If the date inserted in this block does not meet the applica		
document's effective date on the Department of State's records.	•	
5. The plan of conversion has been approved in accord	lance with all a	applicable statutes.
6. The "Converted or Other Business Entity" has agreed which such members are entitled under ss. 605.1006		
		Matter -
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Halling

Signed this 15 day of School 20 6 Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: Printed Name: Jimmy Huchbio Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Simmy Hollable Title: (5) UND Signature: Printed Name: Signature: Printed Name: Signature: Printed Name:_____ Title: Signature: Printed Name: _____ Title: _____ Carlina Carlina Signature: Printed Name:_____ If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: \$25.00 Articles of Conversion: Fees for Florida Articles of Organization: \$125.00 \$30.00 (Optional) Certified Copy: Čertificate of Status: \$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

Mailing Address:

ARTICLE I - Name:

ARTICLE II - Address:

Principal Office Address:

The name of the Limited Liability Company is:

532 Sunsedr 5	32 Suncise de
Dejando 1/19 32803	(B) 40 +1 52805
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own Registered Agents) business entity with an active Florida registration.)	re, & Registered Agent's Signature: ent. You must designate an individual or another
The name and the Florida street address of the registe Name	red agent are:
Florida street address (P.O. Box	NOT acceptable)
ortando E	1 328 63
City	Zip
Having been named as registered agent and to acceptiability company at the place designated in this cregistered agent and agree to act in this capacity. If statutes relating to the proper and complete performaccept the obligations of my position as registere	ertificate, I hereby accept the appointment as further agree to comply with the provisions of all nance of my duties, and I am familiar with and
Rogistered Agent's Signature	111 (REQUIRED)
Rogistered Agont's Biginature	· ···
(CONTINUED)	. The state of the
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	garage at
26.	$e^{-i\omega t}$, $e^{i\omega t}$

Company:		100 (0)	
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager		11.01/71.00	
MGR	7/2000	y Harabee	
	537	whise sky	
	OLLANCA	0 to 20803	
			
			
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(Use attachment if necessary) CLE V: Other provisions, if any.			
The violations, it may		-	
REQUIRED SIGNATURE:	1	•	
1			
- Jumn	- Minus	*.:	
Signature of a member or :	an authorized ren		
This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	with section 605.0203	(1) (b), Florida Statutes. I am aware th	
immi	1 MICH	2000	
T_{y_i}	ped or printed nam	e of signee	

ARTICLE IV-

espant i. entaris :