# 25000079365 R 22425

(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:
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02/13/25--01022--019 \*\*155.00

# COVER LETTER . . .

TO: New Filing Section Division of Corporations		
SUBJECT: LERROSARBEY ADVISORY LLC		
(Name of Resu	lting Florida Limite	rd Company)
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lia		on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	this matter to:	
VICTOR LERRO		
(Contact Person)		
VICTOR LERRO & Company (Firm/Company)	P. A.	
(Firm/Company)		
2315 NE 25TH STREET, STE 107		
(Address)		
BOCA RATON. FL 33486		
(City, State and Zip Code)		
VLERRO@GMAIL.COM		
E-mail Address: (to be used for future annual rep	ort notifications)	
For further information concerning this matt	er, please call:	
VICTOR LERRO	at ( <sup>561</sup>	465-123
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoundoflars and drawn on a bank located in the U	-	rocessed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ ☐ \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327		Street Address:  New Filing Section  Division of Corporations  The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# **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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Artic VICTOR LERRO & COMPANY, P.A	les of Co	nversio	on is:
(Enter Name of Other Business Entity)	_		
2. The "Other Business Entity" is a CORPORATION  (Enter entity type. Example: corporation, limited partnership, general partnership, comm	on law or l	ousiness	trust, etc.)
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the			
(Enter state, or if a non-U.S. entity, th	e name of t	he coun	try)
on APRIL 25, 1997 (date of organization, formation or incorporation)		[c) (c)	
3. The name of the Florida Limited Liability Company as set forth in the attached Art	icles of C	)rgani:	zation:
LERROSARBEY ADVISORY LLC		က်	المصد. مو
(Enter Name of Florida Limited Liability Company)		5 <b>9</b>	
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 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 dadocument's effective date on the Department of State's records		·	•
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 6TH day of FEBRUARY	20 25	
Signature of Authorized Representativ		
Signature of Authorized Representative: Printed Name: VICTOR LERRO	Title: MEMBER	
Signature(s) on behalf of Other Business	Entity: [See below for required signature(s)]	
Signature: Who		
Printed Name: VICTOR LERRO	Title: PRESIDENT	
Signature:		
Printed Name:	Title:	
Signature:	Title:	
Printed Name:	Title:	
Signature:	Title:	reads
Printed Name:	Title:	, , ,,,,
Signature:	Title:	
Printed Name:	Title:	. <u>-</u> 
Signature:		70
Printed Name:	Title:	့ ပူ
If Florida Corporation: Signature of Chairman, Vice Chairman, Di If Directors or Officers have not been selec		٠
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:	
All others: Signature of an authorized person.		
Fees:		

\$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

LERROSARBEY ADVISORY LLC		
	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	he principal office of the Limited Liabil	ity Compan
Principal Office Address:	Mailing Address:	
1499 WEST PALMETTO PARK RD, #107	1499 WEST PALMETTO PARK RD	. 107
BOCA RATON, FL 33486	BOCA RATON, FL 33486	<u>=====</u>
		gnatúre:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Registered Agent. You must designate an individual	gnatúre:
The name and the Florida street address of	Registered Agent. You must designate an individual	gnature: or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of VICTOR LERRO	Registered Agent. You must designate an individual	gnature: or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of   VICTOR LERRO	Registered Agent. You must designate an individual the registered agent are:	gnature: or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of   VICTOR LERRO  1499 WEST PALMETTO	Registered Agent. You must designate an individual the registered agent are:  Name PARK RD, STE 107	gnature: or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of   VICTOR LERRO  1499 WEST PALMETTO	Registered Agent. You must designate an individual the registered agent are:  Name PARK RD, STE 107 (P.O. Box NOT acceptable)	gnature: or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of   VICTOR LERRO  1499 WEST PALMETTO	Registered Agent. You must designate an individual the registered agent are:  Name PARK RD, STE 107	gnature: or another

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

A	RT	CI	E,	IV.
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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			
MGR	VICTOR LERRO 1499 WEST PALMETTO PK RD, STE 107		
	BOCA RATON, FL 33486		
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(Use attachment if necessary)	 ; ;		
	••		
FICLE V: Other provisions, if any.	့ ယူ		
	<u>ි</u> ග		
	<sub>50</sub> &		
REQUIRED SIGNATURE:			
/hs			
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware that the Department of State constitutes a third degree felor		
VICTOR LERRO	ped 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)