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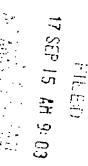
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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T. BURCH SEP 1 8 2017

T. BURGH

COVER LETTER

New Filing Section Division of Corporations

TO:

SUBJECT: FIN		10NZ LLC ulting Florida Limited Com	npany)
		-	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	spondence concerning	this matter to:	
ANTHON	Contact Person) ALSOLUTI	ONZ LLC	
	(Firm/Company) ST TERRAC (Address)		
<u>SARASO</u>	7A FL 3 ity, State and Zip Code)	1243	
E-mail Address: (to be	VETA & FINA used for future annual rep	NCIALSOLUT port notifications)	70NZ, COM
For further informatio	n concerning this mat	ter, please call:	
A-WTHONY T. (Name of Contact	GAETA I Person)		31 2965 time Telephone Number)
Enclosed is a check fo dollars and drawn on a	-	, -	ed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	:	MAILING A	ADDRESS:

New Filing Section Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

32301

New Filing Section

Division of Corporations Clifton Building

2661 Executive Center

Circle Tallahassee, FL

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 Articles of Conversion is: The Name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of <u>COLORADO</u>
on $\frac{10/23/2007}{10/23/2007}$ (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Financia Solutionz LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 09/07/2017.
(The effective date: 1) 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; AND 2) must be the same as
the effective date listed in the attached Articles of Organization, if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

5. The plan of conversion has been approved in accordance with all applicable statutes.

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this day of _SEPTEMBER	2017
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: At July Printed Name: ANTHONY T. GAETA	Title: PRESCIDENT
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: MODRA GAETA	Title: AMBO
• • • •	
Signature: Printed Name:	Title
Timed Name.	
Signature:Printed Name:	
Printed Name:	Title:
Signature:	_
Signature:Printed Name:	Title:
Signatura	
Signature: Printed Name:	Title:
Signature:	rp: .
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Corporation	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Financial Solutionz 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 off	fice of the Limited Liability Company is:
Principal Office Address: Mailing	Address:
3641 715 TERRALE EAST 361 SARASOTA FL SA 34243	11 71 ST TERRACE LITST ARASOTA FL 34243
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Registered Agent. You business entity with an active Florida registration.)	Registered Agent's Signature: 'ou must designate an individual or another
The name and the Florida street address of the registered a	agent are:
MODRA GAETA Name 3641 71 St TERRA Florida street address (P.O. Box NO)	Tacceptable)
SARASOTA FL	34243 Zip
Having been named as registered agent and to accept se liability company at the place designated in this certiforegistered agent and agree to act in this capacity. I furth statutes relating to the proper and complete performance accept the obligations of my position as registered agent a	icate, I hereby accept the appointment as er agree to comply with the provisions of alce of my duties, and I am familiar with and ent as provided for in Chapter 605, F.S

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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	ANTHANY T CLETT
	DOWN TIST TO DOWN
	3641 7151 TERRACE 157451
	2774501A FL 29293
AMBR	MODRA GAITA
	3641 TIST TERRIAGE FAST
	SARASOTA FL 34243 -
	7 CO
	
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prior to or 90 calendar days after the da	ust be specific and cannot be more than five business days te of filing.) eet the applicable statutory filing requirements, this date will not be listed as the
This document is executed in I am aware that any false inf	ther or an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes. Formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.
ANTHON	

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)