L23000291465

(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:						
o DECAR →						
FFB 1 1 12 .						





700421881627

01/19/24---01009--008 ++25.00

· •

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	UBJECT: Avanti Capital Solutions, LLC						
			Limited Liability Compar	ny			
Limit			ee(s) are submitted to r Business Entity" in a				
Please	e return all cori	espondence concerning	ng this matter to:				
Andre	w Aiello						
		Contact Person					
Avanti	i Capital Solution:	s, LLC					
		Firm/Company					
		Address					
	(City, State and Zip Code					
	o@avantisolution:	-					
E	-mail address: (to	be used for future annual	report notification)				
For fu	irther informat	ion concerning this ma	itter, please call:				
Andrew Aiello			at (⁷⁶⁰) ⁸²²	-7693			
N	Name of Contact P	erson		Area Code and Daytime Telephone Number			
Enclo	sed is a check	for the following amou	unt:				
■ \$25	5.00 Filing Fee	S30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	S60.00 Filing Fee, Certified Copy, and Certificate of Status			
Mailing Address:			Street Address:				
_	tration Section		Registration Section				
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee				
Tallahassee, F1, 32314			2415 N. Monroe Street, Suite 810				
			Tallahassee, FL 32303				

CR2E106 (05/17)

Articles of Conversion

For

Florida Limited Liability Company

Into

"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045. Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:
Avanti Capital Solutions, LLC
Enter Name of Florida Limited Liability Company
2. The name of the "Converted or Other Business Entity" is:
Avanti Capital Solutions, LLC
Enter Name of "Converted or Other Business Entity"
3. The "Converted or Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country) The formation document is attached (if applicable).
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.
5. This conversion shall be effective in Florida on: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State: AND 2) must be the same as the effective date of the conversion under the laws governing the "Other Business Entity.")
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.

a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48. Street Address: Mailing Address: 7. 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 Signature: Must be signed by a Member or Authorized Representative Managing Member Andrew Aiello Printed Name: Fees: Filing Fee: \$25.00 Certified Copy: \$30.00 (Optional)

6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to

transact business in Florida, the "Converted or Other Business Entity":

\$5.00 (Optional)

Certificate of Status:

COVER LETTER

TO:	: Registration Section Division of Corporations					
SUBJE	E C T: ^{Avanti Ca}	pital Solutions, LLC				
		Name of Florida	Limited Liability Compan	y		
Limite			ce(s) are submitted to c r Business Entity" in a			
Please	return all corr	espondence concernin	g this matter to:			
Andrew	· Aiello					
		Contact Person				
Avanti (Capital Solutions	. LLC				
		Firm/Company	-			
		Address				
	(City, State and Zip Code				
	@avantisolutions	.org be used for future annual :	report politication)			
For 1ur	ther informati	on concerning this ma	itter, please can:			
Andrew	Aiello		at (760) \frac{822}{}	-7693 		
Na	ame of Contact P	erson	Area Code and Day	ytime Telephone Number		
Enclos	sed is a check	for the following amou	int:			
\$25.	.00 Filing Fee	S30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status		
Mailing Address:		Street Address:				
Registration Section			Registration Section			
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee			
Tallahassee, F1, 32314			2415 N. Monroe Street, Suite 810			
			Tallahassee, FL 32303			

CR2E106 (05/17)