L14000164025

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
1	Office Use On	lv



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SECRETARY OF STATE

0CT 2 1 2014 T. HAMPTON

COVER LETTER

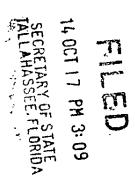
TO: Registratio Division of	n Section Corporations		
SUBJECT: L. Ba	rrett Consulting, LLC		
		of Resulting Florida Limite	ed Company)
			nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all co	orrespondence concernin	g this matter to:	
Lake H. Barrett			
	(Contact Person)		
L. Barrett Consu	Iting LLC		
"	(Firm/Company)	_	
1278 Tuscany B	lvd		
	(Address)		
Venice FL 34292	2		
	(City, State and Zip Code)		
Lake@Barrett.co	om		
E-mail Address: (t	o be used for future annual re	port notifications)	
For further inform	ation concerning this ma	tter, please call:	
Lake Barrett		at (941)445	-4873
(Name of Co	ntact Person)		ytime Telephone Number)
Enclosed is a chec	k for the following amou	int:	•
□ \$150.00 Filing Fee (\$25 for Conversion & \$125 for Articles of Organization)	s \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRI	ESS:	MAILING A	ADDRESS:
Registration Section		Registration	
Division of Corpo	rations	Division of C	
Clifton Building		P. O. Box 63	
2661 Executive Co Tallahassee, FL 3		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 Articles of Conversion is L. Barrett Consulting, LLC	s:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LLC	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of Maryland	
3/26/2002 (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	ion:
L. Barrett Consulting, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: November 1, 2014 The effective date: 1) cannot be prior to date of receipt or filed date 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 in the attached Articles of Organization, if an effective date is listed therein.)	
5. The plan of conversion has been approved in accordance with all applicable statutes.	

Page 1 of 2



Signed this 14 · day of October	20 <u>14</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Lake H. Barrett	Title: Member
Signature(s) on behalf of Other Business-Entity:-	See below for required signature(s).]
Signature: Lake H. Barrett	Title: Member (only one)
Signature:Printed Name:	Tide
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Tid
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	SECRET ALLA
Fees:	TH - 1

\$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

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
L. Barrett Consulting, LLC	
(Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1278 Tuscany Blvd	1278 Tuscany Blvd
Venice FL 34292	Venice FL 34292
	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:
	ame
1278 Tuscany Blvd Florida street address (I	P.O. Box <u>NOT</u> acceptable)
Venice	FL 34292
City	Zip
liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and comple	nd to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and tregistered agent as provided for in Chapter 605, F.S
Registered Agent's S	Signature (REQUIRED)
	TINUED) ASSEE, FLORIE 210f2

A	D'	TI	T T	, L/	7

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	Laka U. Darratt	
AMBR	Lake H. Barrett 1278 Tuscany Blvd	
	Venice, FL 34292	
,	Verlice, I L 34292	
 		
·	· -	
		
(Use attachment if necessary)		
FICLE V: Effective date, if other than the on effective date is listed, the date must r 90 days after the date of filing.)		
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FICLE V: Effective date, if other than the effective date is listed, the date must r 90 days after the date of filing.) FICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member	Be specific and cannot be more than	five business days prior
FICLE V: Effective date, if other than the effective date is listed, the date must r 90 days after the date of filing.) FICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (er or an authorized representative of 1) (b), Florida Statutes, the execution	f a member.
PICLE V: Effective date, if other than the n effective date is listed, the date must r 90 days after the date of filing.) PICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (constitutes an affirmation under the pen I am aware that any false information su	er or an authorized representative of alties of perjury that the facts stated headsmitted in a document to the Departm	f a member. of this document erein are true.
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PICLE V: Effective date, if other than the an effective date is listed, the date must r 90 days after the date of filing.) PICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (constitutes an affirmation under the pen I am aware that any false information succonstitutes a third degree felony as proved Lake H. Barrett Ty Filing Fees: \$125.00 Filing Fee for Articles of Registered Agent	er or an authorized representative of 1) (b), Florida Statutes, the execution alties of perjury that the facts stated he abmitted in a document to the Department of the Department of the Department of Organization and Designation and Designation	five business days prior 10/14/14 fa member. of this document erein are true.