## L15000198677

(Re	questor's Name)	
——————————————————————————————————————	dress)	
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PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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12/02/15--01003--002 \*\*25.00

11/03/15--01028--008 \*\*125.00

12-11-15





## **COVER LETTER**

Division of Corporations	
CEL C.	iancial, LLC
SOBSECT:	
(Name)	of Resulting Florida Limited Company)
·	les of Organization, and fees are submitted to convert an "Other lability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:
	oore
CFA Financial	luc
(Firm/Company)	Drange Avenue, Ste. 200-D
(Address)	Stange Man
	34236
(City, State and Zip Code) Charlie Cfa @	aol.com
E-mail Address: (to be used for future annual re	port notifications)
For further information concerning this ma	tter, please call:
(Name of Contact Person)	tter, please call: $\frac{G41}{Area Code}$ $\frac{G60-2046}{Area Code}$ $\frac{G47-421-173}{Area Code}$
Enclosed is a check for the following amou	int:
t a	\$180.00 Filing Fees and Certified Copy and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS: (400)
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314
Tallahassee, FL 32301	Tallallassee, L.D. 52517

CFA Financial, LLC 630 South Orange Avenue Ste. 200-D Sarasota, FL 34236

November 19, 2015

Ms. Teresa Brown
Regulatory Specialist II
Florida Department of State
Division of Corporations – Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Dear Ms. Brown:

In your letter dated November 10, 2015 (copy attached) with respect to CFA Financial, LLC, Ref. Number: W15000074153, I have enclosed not only a copy of your letter, but the documents you requested I complete to meet the Florida Department of State filing requirements. These documents include the Cover Letter (1 page), Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company (2 pages), and Articles of Organization for Florida Limited Liability Company (2 pages). I have also enclosed check #1400 for \$25.00 for the Articles of Conversion Fee, and as you indicated on our recent conversion, you already have check #1349 in the amount of \$125.00 for the Florida Articles of Organization. Each of these checks are personal checks from me as the Registered Agent of CFA Financial, LLC. As noted on the Cover Letter, I can be contacted by mail at the office address, 630 South Orange Avenue, Ste. 200-D, Sarasota, FL 34236, or the office phone as 941-960-2046, or my personal cell at 847-421-1733.

I have noted the effective date as December 11, 2015, to ensure that there will be adequate time to complete the filing once you have received the enclosed materials. Thank you for attention to this matter.

incerely yours,

Charles Moore

Enclosures – Documents as Noted Check #1400



November 10, 2015

CHARLES L MOORE 630 SOUTH ORANGE AVE, STE 200-D SARASOTA, FL 34236

SUBJECT: CFA FINANCIAL, LLC Ref. Number: W15000074153

We have received your document for CFA FINANCIAL, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

The enclosed document(s) does/do not meet our filing requirements. Therefore, we are enclosing our appropriate form(s) and/or instructions.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Teresa Brown Regulatory Specialist II

Letter Number: 715A00023802

## 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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Cincted Liability Corpovation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on (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:  CFA Financial LCC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
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.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

Signed this 19th day of November 2015.
Signature of Authorized Representative of Limited Liability Company:
Signature of Authorized Representative:  Printed Name: Title: CEO
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature:  Printed Name: Charles C. Moore Title: CEO (15% Quine)
Signature: Justy + McCarthy itle: Chief Compliance office   25% Owner
Signature:
Signature: Title:
Signature: Printed Name: Title:
Signature: Title:
Signature: Printed Name: Title:
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:
Articles of Conversion:  Fees for Florida Articles of Organization:  Certified Copy:  Certificate of Status:  \$25.00 \( \sqrt{1}\) \$125.00 \( \sqrt{2}\) \$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:
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address:  630 South Orange Avenue  Ste. 200-D  Savasota, FL 34236  Mailing Address:  630 South Orange Avenue  Ste. 200-D  Savasota, FL 34236
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Charles L. Moore Name
492 Partiridge Circle
Florida street address (P.O. Box NOT acceptable)
Savasota FL 34236 City Zip
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)

Page 1 of 2

Company:		
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
<u> 1711151-</u>	AG2 North Ace Circle	
	Sarasota, FL 34236	
Martin Martin Company		
	-	
	,	
r 90 days after the date of filing.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listement's effective date on the Department of State's records.		
FICLE VI: Other provisions, if any.	•	
DEQUIDED SIGNATUDE.		
REQUIRED SIGNATURE:	Olle	
This document is execute I am aware that any false i	ember or an authorized representative of a member. d in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.	
	Charles L. Moore	
	Typed or printed name of signee	
\$125.00 Filing Fee for Artic		
\$125.00 Filing Fee for Artic \$ 30.00 Certified Copy (Op	Typed or printed name of signee  Filing Fees  cles of Organization and Designation of Registered Agent	

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-