

L16000001558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

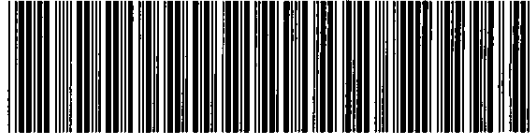
Special Instructions to Filing Officer:

Office Use Only

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T. SCOTT



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14 DEC 31 AM 9:30



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2015

MS. MEREDYTH J. SAUTER
KIRE CONSULTING LLC
1219 SIESTA KEY CIRCLE
PORT ORANGE, FL 32128

SUBJECT: KIRE CONSULTING LLC
Ref. Number: W15000050815

We have received your document for KIRE CONSULTING LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$150.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Tyrone Scott
Regulatory Specialist II

Letter Number: 315A00015801

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kire Consulting LLC
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Ms. Meredyth J. Sauter
(Contact Person)

Kire Consulting LLC
(Firm/Company)

1219 Siesta Key Circle
(Address)

Port Orange FL 32128
(City, State and Zip Code)

meredyth@kireconsulting.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Meredyth Sauter
(Name of Contact Person)

at (703) 462-0723
(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

| | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | <input type="checkbox"/> \$155.00 Filing Fees and Certificate of Status | <input type="checkbox"/> \$180.00 Filing Fees and Certified Copy | <input type="checkbox"/> \$185.00 Filing Fees, Certified Copy, and Certificate of Status |
|--|---|---|--|

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

The Articles of Conversion **and attached Articles of Organization** 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:
Kire Consulting LLC
(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 Virginia
(Enter state, or if a non-U.S. entity, the name of the country)
on 12/20/2011
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
Kire Consulting LLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: August 7, 2015
(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 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.

Signed this 21 day of July 20 15.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Meredith J. Sauter
Printed Name: Meredith J. Sauter Title: Principal

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: Meredith J. Sauter
Printed Name: Meredith J. Sauter Title: Principal

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ 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: | \$25.00 |
| Fees for Florida Articles of Organization: | \$125.00 |
| Certified Copy: | \$30.00 (Optional) |
| Certificate of Status: | \$5.00 (Optional) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Kire Consulting LLC

(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:

1219 Siesta Key Circle
Port Orange FL 32128

Mailing Address:

1219 Siesta Key Circle
Port Orange FL 32128

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:

Meredyth Sauter

Name

1219 Siesta Key Circle

Florida street address (P.O. Box **NOT** acceptable)

Port Orange

City

FL

32128

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..

Meredyth J. Sauter

Registered Agent's Signature (REQUIRED)

(CONTINUED)

14 DEC 31 AM 9:30

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Meredyth Sauter

1219 Siesta Key Circle

Port Orange FL 32128

(Use attachment if necessary)

~~August 8, 2015~~ delete
~~July 14, 2015~~

ARTICLE V: Effective date, if other than the date of filing: July 14, 2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Meredyth J. Sauter

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Meredyth J. Sauter

Typed 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)