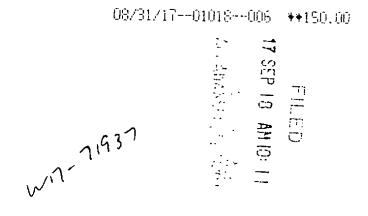
# L17000193866

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

Office Use Only



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T. BURCH SEP 1 9 2017

### **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: Dresback Advisors, LLC		
(Name of Res	ulting Florida Limite	d Company)
The enclosed Articles of Conversion, Articles usiness Entity" into a "Florida Limited Li	_	n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	
Jennifer Dresback		
(Contact Person)		
Dresback Advisors LLC		
(Firm/Company)		
443 Port Royal Boulevard		
(Address)		
Satellite Beach, FL 32937		
(City, State and Zip Code)		
JDresback@gmail.com		
E-mail Address: (to be used for future annual re	port notifications)	
For further information concerning this ma	tter, please call:	
Jennifer Dresback	_at ( <sup>202</sup> )	455-4404
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the	•	ocessed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing F and Certified Copy	
STREET ADDRESS:	MAILI	NG ADDRESS:
New Filing Section		ing Section
Division of Corporations		of Corporations
Clifton Building 2661 Executive Center Circle	P. O. Bo Tallahas	see, FL 32314

Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 1, 2017

JENNIFER DRESBACK 443 PORT ROYAL BLVD SATELLITE BEACH, FL 32937

SUBJECT: DRESBACK ADVISORS, LLC

Ref. Number: W17000071937

RECEIVED

17 SEP 18 PM 2: 31

BUREAU OF COMMERCIAL

BUREAU OF COMMERCIAL

We have received your document for DRESBACK ADVISORS, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is a limited partnership or limited liability limited partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Tim Burch Regulatory Specialist III

www.sunbiz.org

Letter Number: 817A00018121

# 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.

The name of the "Other Business Entity' immediately prior to the filing of the Articles of Conversion is:  Dresback Advisors, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Sole Proprietorship / Limited Liability Company
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
August 4, 2009 on (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the <b>attached Articles of Organization</b> :  Dresback Advisors, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: 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.)
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.

6. 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 t	his 28th	_ day of August	20 <u>17</u> .
		rized Representative of Lim	
Signatur Printed 1	re of Authori: Name: <u>Jennifer</u>	zed Representative: L. Dresback	Title: President and Owner
Signatu	re(s) on beha	If of Other Business Entity:	[See below for required signature(s)]
Cimantum		22 Dea	
Printed 1	Vamo:	Jennifer L. Desbut	_ Title: fresident and Owner
Signatur	e:		
Printed 1	Name:		Title:
Signatur	e:		
Printed 1	Name:		Title:
Signatur	e:		
Printed 1	Name:	<del></del>	Title:
Signatur	e:		
Printed 1	Name:		Title:
Signatur	e:		
Printed 1	Name:		Title:
Signatur		on: n, Vice Chairman, Director, or is have not been selected, an Ir	
	la General P	artnership or Limited Liabil eral Partner.	ity Partnership:
		artnership or Limited Liabil eneral Partners.	ity Limited Partnership:
All othe Signatur	rs: e of an autho	rized person.	
Fees:			
,	Articles of Co	onversion:	\$25.00
		da Articles of Organization:	\$125.00
	Certified Cop Certificate of	•	\$30.00 (Optional) \$5.00 (Optional)
•	certificate (/i	Status:	Ψ5.00 (Οριιοιιαι)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE 1 - Name:</b> The name of the Limited Liability Company	is:
Dresback Advisors, LLC.	
(Must contain the words "Limited Lia	bility 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:
443 Port Royal Boulevard	443 Port Royal Boulevard
Satellite Beach, FL 32937	Satellite Beach, FL 32937
	ame
943 Port Royal Boulevard	O. Dou NOT accontable)
riorida street address (F	P.O. Box NOT acceptable)
Satellite Beach	FL 32937
City	Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	1 10 10 10
MGR	Jennifer Dresback
	443 Port Royal Boulevard Satellite Beach, FL 32937
	Saterific Beach, 14, 52757
	<u> </u>
<del>-                                    </del>	
	e de la companya de
	<u></u>
(Use attachment if necessary)	
(Use attachment if necessary)  LE V: Other provisions, if any.	
•	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware ament to the Department of State constitutes a third degree for
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am aware innent to the Department of State constitutes a third degree for
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am awa

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