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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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### **COVER LETTER**

SUBJECT: Ch	esapeake (	Consulting I	International, LLC
	(Name of Res	ulting Florida Limited Com	pany)
		-	I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:	
Sherry	(Contact Person)	llan	
Sherry D. McMillan (Contact Person) Chesapeake (Firm/Company)			
(Firm/Company)			
1651 NW 103 PD AVE.  (Address)			
PLANTATION, FL 33322  (City. State and Zip Code)			
PLANT	ATION, F	L 3332	<b>)</b> —
, (0	City, State and Zip Code)		
Chesapeake 1@ bellsouth. net E-mail Address: (to be used for future annual report notifications)			
E-mail Address: (to be	e used for future annual rep	port notifications)	
For further information	on concerning this mat	ter, please call:	
Steve Zi	0	aril o	107 / 200
(Name of Conta	EGLE K	_at (	197-6333 ime Telephone Number)
(Name of Conta	ce r crsony	(Mea Code) (Day)	and refephone (vumber)
	or the following amou a bank located in the t		ed by this office must be payable in US
\$150.00 Filing Fees \$25 for Conversion : \$125 for Articles f Organization)	\$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
TREET ADDRESS	S:	MAILING A	DDRESS:

New Filing Section

P. O. Box 6327

Division of Corporations

Tallahassee, FL 32314

ew Filing Section

ivision of Corporations
ifton Building
61 Executive Center Circle

Ilahassee, FL 32301

TO: New Filing Section

Division of Corporations

# Articles of Conversion

For

# "Other Business Entity"

Into

## Florida Limited Liability Company

FILED 17 DEC -1 AM 10: 16

LUSETARY OF DEATE. ALLAHASSEE, FLORIDA

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:  CHESAPEAKE SERVICING INTERNATIONAL, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability Company M14-3.6  (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 MAY 4, 2005 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
CHESAPEAKE CONSULTING INTERNATIONAL, LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: TANUACY 2, 2018.  (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.)
<u>Note:</u> 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.
7. The plan of conversion has been approved in accordance with all applicable statutes.

. 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 27th day of November	20 2017
signed this or i day of hove whoel	20 7011.
Signature of Authorized Representative of Limi	· · · · · · · · · · · · · · · · · · ·
Signature of Authorized Representative:  Printed Name: Sherry D. McMille	MGR MGR
Signature(s) on behalf of Other Business Entity:	
Signature:	
Signature: Sherry D. McMillan	Title: MGR
<del>-</del>	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
in Directors of Officers have not been selected, an in	corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner,	ty Partnership:
-	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
ignature of an authorized person.	
ces:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE 1 - Name:**

The name of the Limited Liability Company is:

CHESAPEAKE CONSULTING INTERNATIONAL, LLC. (Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.,"

#### **ARTICLE II - Address:**

**Principal Office Address:** 

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

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:
SHERRY D. McMILLAN
Name
1651 NW 103° AVE.
Florida street address (P.O. Box NOT acceptable)
PLANTATION R 33322

City

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)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager  MGR	SHERRY D. McMillan 1651 NW 103RD AVE PLANTATION, FL 33322
<del></del>	
<del></del>	77 OE
<del></del>	AR D 20: 15
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
SHERRY D.	Mc Millan ped or printed name of signee
Ту	
	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)