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PICK-UP	☐ WAIT	MAIL
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(Di	ocument Number)	· · · · · ·
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DATE:

2/21/18

NAME:

EDEN CONSULTING GROUP LLC

TYPE OF FILING: CONVERSION

COST: 155.00

RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: New Filing Se Division of Co					
SUBJECT: EDEN CO	NSULTING GROUP LL	С			
	(Name of Res	ulting Florida Limi	ed Com	pany)	
Business Entity" into	a "Florida Limited Li	ability Company	on, an	d fees are submitted to con- ecordance with s. 605.1045	vert an "Other , F.S.
Please return all corre	espondence concerning	g this matter to:			
NAOMI OSTOPOWITZ					,
	(Contact Person)		_		F. 67 7
ALLSTATE CORPORA	TE SERVICES CORP.				
	(Firm/Company)	· ,- ,	-		
2215 HENDRICKSON S	STREET, SUITE 1				(A 7)
	(Address)		-		
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	City, State and Zip Code)		-		43 S
FILING@ACS123.COM					٠,
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For further information	on concerning this ma	tter, please call:			
NAOMI OSTOWITZ		_at (906-9	2220	
(Name of Conta	ct Person)	(Area Code) (Day	time Telephone Number)	
	or the following amou a bank located in the		rocess	sed by this office must be p	ayable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	■\$155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Cop		S185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS	S:	MAII.	ING A	ADDRESS:	
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Division of Corporati	ons	Divisio	n of C	Corporations	
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Tallahassee, FL 32314

INHS11 (7/17)

2661 Executive Center Circle

Tallahassee, FL 32301

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 EDEN CONSULTING GROUP INC.	
(Enter Name of Other Business Entity)	<i>O</i> 1
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law	v or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name	e of the country)
01/03/2018 on	
(date of organization, formation or incorporation)	
3. The name of the Elevide Limited Linkility Company or set forth in the set of a set of	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles	of Organization:
EDEN CONSULTING GROUP LLC	
(Enter Name of Florida Limited Liability Company)	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 ca 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 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.	
 The "Converted or Other Business Entity" has agreed to pay any members having appraisal rig which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	ghts the amount to SETTRE A

Signed this 10	day of FEBRUARY	20_18	
Signature of Auth	orized Representative of L	imited Liability Company:	
Signature of Autho Printed Name: STEV	rized Representative:	Title: AUTHORIZED PERSON	
Signature(s) on bel	half of Other Business Entit	v: See below for required signat	ure(s)
	2		
Printed Name: EUGI	ENE NEWMAN	Title: PRESIDENT	
Cionatura			
Printed Name:		Title:	
Signature: Printed Name:	· · · · · · · · · · · · · · · · · · ·	Title:	
Timed Name.		ritte	
Signature:		·	
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Printed Name:		Title:	
	······		
	<u>ation:</u> nan, Vice Chairman, Director cers have not been selected, a		
If Florida General Signature of one Ge	Partnership or Limited Lia neral Partner.	bility Partnership:	
If Florida Limited Signatures of ALL	Partnership or Limited Lia General Partners.	bility Limited Partnership:	
All others: Signature of an auth	orized person.		

18 FEB 21 PM 12: 45
SECRETAIN SECRETAINS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FE	ONIDA LIMITED LIA	DILAT I CONSTANT
The name of the Limited Liability Company is:		
EDEN CONSULTING GROUP LLC	C #1 C T - M C M	
(Must contain the words "Limited Liability	y Company, "L.L.C., or "LLC.)	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
16001 COLLINS AVE, APT 2002	16001 COLLINS AVE, APT	r 2002
SUNNY ISLES BEACH, FL 33160	SUNNY ISLES BEACH, FL	. 33160
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate ar	
EUGENE NEWMAN		
Name		
16001 COLLINS AVE, APT 200)2	
Florida street address (P.O	. Box NOT acceptable)	
SUNNY ISLES BEACH	FL 33160	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p accept the obligations of my position as reg	this certificate, I hereby active. I further agree to composity. I further agree to compositions, a	ccept the appointment as oly with the provisions of all and I am familiar with and
		18 FALI
Registered Agent's Sign	nature (REQUIRED)	FEB AND
(CONTIN	UED)	21 PM IZ: 43

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	erichie verrie
AMBR	EUGENE NEWMAN 16001 COLLINS AVE, APT 2002
	SUNNY ISLES BEACH, FL 33160
	
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED STONATURE:	
REQUIRED STONATURE: Signature of a member of this document is executed in accordance.	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am aware that secument to the Department of State constitutes a third degree felony
REQUIRED STONATURE: Signature of a member of this document is executed in accordany false information submitted in a document i	nce with section 605.0203 (1) (b), Florida Statutes, I am aware that
REQUIRED STONATURE: Signature of a member of this document is executed in accordary false information submitted in a document in a submitted in a subm	Typed or printed name of signee
REQUIRED SIGNATURE: Signature of a member of this document is executed in accordary false information submitted in a document i	Typed or printed name of signee Filing Fees
REQUIRED SIGNATURE: Signature of a member of this document is executed in accordary false information submitted in a document i	Typed or printed name of signee Filing Fees of Organization and Designation of Registered Agent
REQUIRED STONATURE: Signature of a member This document is executed in accorda any false information submitted in a do as provided for in s.817.155, F.S. STEVEN WEISS \$125.00 Filing Fee for Article	Typed or printed name of signee Filing Fees of Organization and Designation of Registered Ren