# L\80000[5]19

(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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<sup>rea 23</sup> 2018 C <sub>Kinsey</sub>

# **COVER LETTER**

TO: New Filing So Division of C			
SUBJECT: ITD Tech	nologies LLC		
		ulting Florida Limite	ited Company)
			tion, and fees are submitted to convert an "Othery" in accordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:	
Brian Bloom			
	(Contact Person)	· · · · ·	_
ITD Technologies LLC			
	(Firm/Company)		<del>-</del>
1299 Biltmore Dr.			
· · · · · · · · · · · · · · · · · · ·	(Address)	<u> </u>	_
Ormond Beach, Florida	32174		
((	City, State and Zip Code)		-
brian.itdtechnologies@gi	mail.com		
E-mail Address: (to b	e used for future annual re	port notifications)	_
For further information	on concerning this ma	tter, please call:	
Brian Bloom		_at ( <sup>386</sup>	)675-3766
(Name of Conta	ict Person)	(Area Code)	(Daytime Telephone Number)
	or the following amou a bank located in the		processed 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 and Certified Cop	
STREET ADDRES	S:	MAILI	ING ADDRESS:
New Filing Section			Filing Section
Division of Corporat	ions		on of Corporations
Clifton Building	Ci1-		Box 6327
2661 Executive Cent Tallahassee, FL 323		t attaha:	assee, FL 32314

## **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.

(Enter Name of Other Business Entity)	
·	
2. The "Other Business Entity" is a corporation	
(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)	
12/22/2017	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizati	on:
ITD Technologies LLC	
(Enter Name of Florida Limited Liability Company)	
n/a	
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 a	iter
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 statutory filing requirements.	he
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 Dusiness Entity" has acreed to now any members having annexical rights the amount	
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amoun which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	ii to
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At the state of th	أستة
Cr Fm	
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Signed this	21st day	of February		20 <u>18</u>
Signature	of Authorized	Representative	of Limit	ed Liability Company:
Signature o	f Authorized R	enresentative:	Bria	n Bloom
Printed Nan	ne: Brian Bloom			Title: owner/manager
Signature(	s) on behalf of (	Other Business E	Entity: [S	See below for required signature(s)]
Cionatumai	Baia	Al. m	_	
Printed Nav	ne Brian Bloom	MODIT C	-	Title: Chairperson
T TIME CO TVAL	ne. <u>Ditan Dissin</u>	<del></del>		Title.
Signature:				
Printed Nar	ne:			_Title:
Signature:				Title:
Printed Nar	ne:	<del> </del>		Title:
Signature:				
Printed Nar	ne:			Title:
11111001101				
Signature:				
Printed Nar	ne:			_ Title:
Signature:				
Printed Nar	ne:			_ little:
If Florida (	Corporation:			
		e Chairman, Dire	ector, or C	Officer.
•			•	orporator must sign.
				,
		<u>rship or Limited</u>	<u>l Liabilit</u>	y Partnership:
Signature o	f one General Pa	artner.		
If Florida l	limited Dautus	wahin ay I indisad	l I iahilia	I inside d Denote condition
Signatures	of <u>ALL</u> General	Partners	ı Madimi	y Limited Partnership:
Signatures (	or ALL General	i artifers.		
All others:				
	f an authorized [	person,		
Fees:				
				00000
	icles of Conver			\$25.00
		ticles of Organiz	zation:	\$125.00
	tified Copy:			\$30.00 (Optional)
Cer	tificate of Statu	S:		\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ITD Technologies I	LC	
		ability Company, "L.L.C.," or "LLC.")
ARTICLE II - A		a minoral office of the City of I listing Common in
The maning add	ress and street address of th	e principal office of the Limited Liability Company is:
Principal Office	e Address:	Mailing Address:
1299 Biltmore Dr		1299 Biltmore Dr.
Ormond Beach, Flo	orida	Ormond Beach, Florida
32174		32174
(The Limited Liability	Registered Agent, Register Company cannot serve as its own R an active Florida registration.)	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
(The Limited Liability business entity with:	Company cannot serve as its own R	egistered Agent. You must designate an individual or another
(The Limited Liability business entity with:	y Company cannot serve as its own R an active Florida registration.)  The Florida street address of the Brian Bloom	egistered Agent. You must designate an individual or another
(The Limited Liability business entity with:	(Company cannot serve as its own Ran active Florida registration.)  He Florida street address of the Brian Bloom  No.	egistered Agent. You must designate an individual or another he registered agent are:
(The Limited Liability business entity with:	Company cannot serve as its own R an active Florida registration.)  Brian Bloom  N  1299 Biltmore Dr.	egistered Agent. You must designate an individual or another he registered agent are:
(The Limited Liability business entity with:	Company cannot serve as its own R an active Florida registration.)  Brian Bloom  N  1299 Biltmore Dr.	egistered Agent. You must designate an individual or another he registered agent are: ame
(The Limited Liability business entity with:	Prize Plorida street address of the Plorida street address of the Plorida Brian Bloom  1299 Biltmore Dr.  Florida street address (1	he registered agent are:  ame  P.O. Box NOT acceptable)

Bria Bloom

Registered Agent's Signature (REQUIRED)

(CONTINUED)

### ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	p : bi
MGR	Brian Bloom
	1299 Biltmore Dr.
	Ormond Beach, Florida 32174
AMBR	Laura Bloom
	1299 Biltmore Dr.
	Ormond Beach, Florida 32174
	Ormond Beach, Fiorida 52174
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	an authorized representative of a member
REQUIRED SIGNATURE:  Brian Bloom  Signature of a member or a	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. 1 am aware tha
Signature of a member or a This document is executed in accordance any false information submitted in a docur	with section 605.0203 (1) (b), Florida Statutes. I am aware tha
REQUIRED SIGNATURE:  But Bloom  Signature of a member or a  This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware tha
REQUIRED SIGNATURE:  Brand Bloom  Signature of a member or a This document is executed in accordance any false information submitted in a document is a document in a docu	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware tha ment to the Department of State constitutes a third degree felon

### 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)