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| (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: |
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Office Use Only



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COVER LETTER

| TO: New Filing So Division of C | | | | |
|--|---|--|--------|---|
| SUBJECT: Richard A | . Clark Consulting, LLC | | | |
| SUBJECT. | (Name of Res | sulting Florida Limite | d Comp | pany) |
| | | _ | - | fees are submitted to convert an "Other cordance with s. 605.1045, F.S. |
| Please return all corre | espondence concernin | g this matter to: | | |
| Richard A. Clark | | | | |
| | (Contact Person) | | | |
| Richard A. Clark Consul | ting, LLC | | | |
| | (Firm/Company) | | | |
| 301 Broome Street | | | | |
| | (Address) | | | |
| Fernandina Beach, Florid | la, 32034 | | | |
| | City, State and Zip Code) | | | |
| Raendm@me.com | , , | | | |
| E-mail Address: (to b | e used for future annual re | port notifications) | | |
| | | • | | |
| For turtner information | on concerning this ma | iter, please call: | | |
| Richard A. Clark | | _at (515) | 202-83 | me Telephone Number) |
| (Name of Conta | ct Person) | (Area Code) | (Dayti | me Telephone Number) |
| | or the following amou a bank located in the | | ocesse | d 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 | | □\$185.00 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRESS | S: | MAII.IF | NG AT | DDRESS: |
| New Filing Section | | New Fili | | |
| Division of Corporati | ions | | | rporations |
| Clifton Building P. O. B | | ox 6327 | | |

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Richard A. Clark Consulting, LLC |
|--|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc |
| First organized, formed or incorporated under the laws of |
| 10/12/2014 |
| (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| Richard A. Clark Consulting, 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 this 4 day of April | 20_18 | |
|---|--|----------------|
| Signature of Authorized Representative of Limi | ted Liability Company: | |
| Signature of Authorized Representative: Richard A. Clark | Title: President and CEO | |
| Signature(s) on behalf of Other Business Entity: | See below for required signature(s) | |
| Signature: Rechard Clys Printed Name: Richard A. Clork | _Title: <u>President</u> : CE | 0 |
| Signature: | | _ |
| Signature:Printed Name: | Title: | - |
| Signature: | | - |
| Signature:Printed Name: | Title: | - |
| Signature:Printed Name: | | _ |
| 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 Inc. | | |
| If Florida General Partnership or Limited Liabili Signature of one General Partner. | ty Partnership: | |
| If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners. | ty Limited Partnership: | |
| All others: Signature of an authorized person. | | |
| Fees: | | |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) | THE PART OF AM |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company | is: |
|---|--|
| | |
| Richard A. Clark Consulting, LLC | |
| (Must contain the words "Limited Liab | oility Company, "L.L.C.," or "LLC.") |
| ADTICLE BL. A.L. | |
| ARTICLE II - Address: The mailing address and street address of the | principal office of the Limited Liability Company is: |
| The manning address and street address of the | principal office of the Emined Elability Company is. |
| Principal Office Address: | Mailing Address: |
| 301 Broome Street | P.O. Box 497 |
| Fernandina Beach, Florida | Fernandina Beach, Florida |
| 32034 | 32035-(1497 |
| business entity with an active Florida registration.) The name and the Florida street address of the | egistered Agent. You must designate an individual or another are registered agent are: |
| Diakoni Clork | |
| Richard Clark | une |
| IVA. | inc |
| 301 Broome Street | |
| Florida street address (P | O. Box NOT acceptable) |
| Fernandina Beach | FL 32034 |
| City | Zip |
| liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as Registered Agent's Statutes. | 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 |

| | | | | • |
|----|-----|----|--------------|-----|
| AR | T10 | CI | \mathbf{F} | 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 | D. 1. 4. D. 1 |
| President and CEO | Richard A. Clark |
| | 301 Broome Street |
| | Fernandina Beach, Florida 32034 |
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| (Use attachment if necessary) | |
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| LE V: Other provisions, if any. | |
| | |
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| | |
| REQUIRED SIGNATURE: | |
| | |
| | |
| 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 docu as provided for in s.817.155, F.S. | ment to the Department of State constitutes a third degree felony |
| as provided for in \$.817.133, F.S | |
| Richard A. Clark | iast (1 (Hst |
| | ped or printed name of signee |
| - 3 | 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)