

LI9000147391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

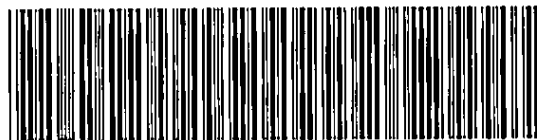
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

File 1st

Office Use Only



300319722813

FILED

2013 OCT 19 A 6:00

FILED

2013 OCT 19 PM 1:50

10/22/13 DS



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 10/18/2018

Name: Marisa Kugelmann

Reference #: 1004965

Entity Name: COGNOSETTA LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☒ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

File first
OCT 19 A 6:00
FILED

Authorized Amount: \$25.00

Signature: Marisa Kugelmann



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 10/18/2018

Name: Marisa Kugelman

Reference #: 1004965

Entity Name: COGNOSETTA LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☒ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

Five First

FILED
OCT 19 A 8:00
TALLAHASSEE, FL

Authorized Amount: \$25.00

Signature: Marisa Kugelman



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 1200000000088

Date: 10/18/2018

Name: Marisa Kugelman

Reference #: 1004965

Entity Name: COGNOSETTA LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☒ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

Five first

COGNOSETTA LLC
OCT 19 10 00
GALFORD

Authorized Amount: \$25.00

Signature: Marisa Kugelman

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COGNOSETTA LLC

Name of Florida Limited Liability Company

The enclosed Articles of Conversion and fee(s) are submitted to convert a Florida Limited Liability Company" into an "Other Business Entity" in accordance with s.605.1045, F.S.

Please return all correspondence concerning this matter to:

LUISA L. SCOTT

Contact Person

Firm/Company

11706 HIDDEN QUAIL DRIVE

Address

AUSTIN, TX 78758

City, State and Zip Code

luisa.l.scott@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luisa L. Scott

Name of Contact Person

at (512) 507-0970

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee
and Certificate of
Status

☐ \$55.00 Filing Fee
and Certified Copy

☐ \$60.00 Filing Fee,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

CR2E106 (05/17)

FILED
OCT 19 A 6:00

Articles of Conversion
For
Florida Limited Liability Company
Into
"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following **Florida Limited Liability Company into an "Other Business Entity"** in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:

COGNOSETTA LLC

Enter Name of Florida Limited Liability Company

2. The name of the "Converted or Other Business Entity" is:

Cognosetta, INC.

Enter Name of "Converted or Other Business Entity"

3. The "Converted or Other Business Entity" is a **CORPORATION**
(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)

organized, formed or incorporated under the laws of **DELAWARE**
(Enter state, or if a non-U.S. entity, the name of the country)

The formation document is attached (if applicable).

4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.

5. This conversion shall be effective in Florida on: **10/19/2018**
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date of the conversion under the laws governing the "Other Business Entity.")

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.

6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":

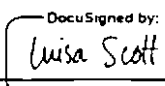
a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address: 17787 TROPICAL COVE DRIVE
TAMPA, FL 33647

Mailing Address: _____

7. 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 18th day of October, 2018

Signature: 
DocuSigned by: B2BFSCE59FB945D Must be signed by a Member or Authorized Representative

Printed Name: LUISA L. SCOTT Title: AUTHORIZED MEMBER

Fees: Filing Fee: \$25.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

FILED
OCT 19 A 6:00
CLERK OF COURT
HILLSBORO COUNTY, FLORIDA