L1800187976

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Dodament Namber)
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 S Division of C					
SUBJECT: STREAM	ILINE ADVISORS, LLC				
Jobate I.	(Name of Res	ulting Florida L	imited Cor	npany)	
				d fees are submitted to co ecordance with s. 605,104	
Please return all corr	espondence concernin	g this matter	to:		
MARC PELLEGRINI					
	(Contact Person)				
STREAMLINE BUSINI	ESS ADVISORS, LLC				
	(Firm/Company)				
PO BOX 1955					
	(Address)				
MARCO ISLAND, FL.3	34146				
(City, State and Zip Code)				
marc.pellegrini@stream	lineba.com				
E-mail Address: (to b	oe used for future annual re	port notification	ns)		
For further informati	on concerning this ma	tter, please ca	ıll:		
MARC PELLEGRINI		_at (<u>603</u>	722-0	1232	
(Name of Conta	ict Person)	(Area C	ode) (Day	ytime Telephone Number)	
	for the following amou a bank located in the			sed 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 Fi and Certified		\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES New Filing Section	S:		ALING A	ADDRESS:	.51
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Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

INHS11 (7/17)

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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 Conversion is: STREAMLINE BUSINESS ADVISORS, 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
(Enter state, or if a non-U.S. entity, the name of the country)
SEPTEMBER 10, 2012 on .
on SEPTEMBER 10, 2012 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
STREAMLINE ADVISORS, 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.

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Signed this 22ND day of JUNE	20_18
Signature of Authorized Representa	tive of Limited Liability Company:
Signature of Authorized Representativ Printed Name: MARC PELLEGRINI	
Signature(s) on behalf of Other Busin	ess Entity: [See below for required signature(s)]
Signature:	
Printed Name: MARC PROLEGRINI	Title: MANAGER
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman,	
If Directors or Officers have not been so	lected, an Incorporator must sign.
If Florida General Partnership or Lin Signature of one General Partner.	nited Liability Partnership:
If Florida Limited Partnership or Lin	nited Liability Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy:

Certificate of Status:

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SECONDATE OF TALL AFFECT.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:	
STREAMLINE ADVISORS, LLC		
(Must contain the words "Limited Liab	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
1558 JAMAICA COURT	PO BOX 1955	
MARCO ISLAND FL 34145	MARCO ISLAND FL 34146	
ARTICLE III - Registered Agent, Registe: (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The pages and the Elevida street address of the	egistered Agent. You must designate an in	nt's Signature: adividual or another
The name and the Florida street address of the	ie registered agent are.	
MARC PELLEGRINI		
Na	ame	
1558 JAMAICA COURT		
	P.O. Box NOT acceptable)	
MARCO ISLAND	FL 34145	
City	Zip	
	d in this certificate, I hereby acco pacity. I further agree to comply ete performance of my duties, and	ept the appointment as wwith the provisions of all d I am familiar with and

A	RT	CI	F.	IV_{-}
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as provided for in s.817,155, F.S.

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	MARC PELLEGRINI
	PO BOX 1955
	MARCO ISLAND FL 34146
-	
(Use attachment if necessary)	
(6.50),	
LE V: Other provisions, if any.	
	
	·
REQUIRED SIGNATURE:	

Marc Pellegrini
Typed or printed name of signee

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 document to the Department of State constitutes a third degree felony

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)

