LI90000H812L

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Limity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: New Filing S Division of C				
SUBJECT: PROCUE	RE CHANGE LLC			
	(Name of Re	sulting Florida Limit	ited Company)	
			tion, and fees are submitted to convert y" in accordance with s. 605,1045, F.S.	
Please return all corr	espondence concernin	g this matter to:		
PHILIP IDESON				
	(Contact Person)			
PROCURE CHANGE I.	LC			
	(Firm/Company)		_	
6006 SUNSET ISLE DR	IVE			
	(Address)		-	
WINTER GARDEN, FI	., 34787			
	City, State and Zip Code)		_	
PHILIP@ARTOFPROC	· ·			
E-mail Address: (to b	e used for future annual re	port notifications)	-	
For further informati	on concerning this ma	tter inlease call:		
	on concerning time ma	•		
PHILIP IDESON		_at (<u>/34</u>) 634 8304 c) (Daytime Telephone Number)	
(Name of Conta	ict Person)	(Area Code)	(Daytime Telephone Number)	
	for the following amou a bank located in the		processed by this office must be payal	ble 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	5	
STREET ADDRES	S:	MAILI	ING ADDRESS:	
New Filing Section			filing Section	
Division of Corporat	ions		on of Corporations	
Clifton Building		P. O. B	Box 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.

	(Enter Name of Other Business Entity)
2. The "Other Business I	Entity" is a LLC
	pe. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed of	or incorporated under the laws of
5	(Enter state, or if a non-U.S. entity, the name of the country)
4/21/2015	
on (date of organization, form	nation or incorporation)
	da Limited Liability Company as set forth in the attached Articles of Organization:
PROCURE CHANGE LL.C	
(Enter Name of Florida Limited Liability Company)
4. If not effective on the	date of filing, enter the effective date:
the date this document Note: If the date inserted in the	anot be prior to date of receipt or filed date nor more than 90 calendar days after is filed by the Florida Department of State.) his block does not meet the applicable statutory filing requirements, this date will not be listed as the he Department of State's records.
5. The plan of conversion	has been approved in accordance with all applicable statutes.
	er Business Entity" has agreed to pay any members having appraisal rights the amount to re entitled under ss. 605.1006 and 605.1061-605.1072, F.S.
	TALL AND THE

Signed this 14TH - day of JANUARY	20 <u>19</u>	
Signature of Authorized Representative of Li	mited Liability Company:	
Signature of Authorized Representative: Printed Name: PHILIP IDESON	Title: MANAGING MEMBER	_
Signature(s) on behalf of Other Business Entity		
Signature:	Title: MANAGNE MOMBOR	- -
Signature		
Signature: Printed Name:	Title:	-
Signature:		_
Printed Name:	Title:	_
Signature:		_
Signature:Printed Name:	Title:	_
Signature:Printed Name:		_
Printed Name:	Title:	-
Signature:	7.1	_
Signature:Printed Name:	Title:	-
Signature: Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, If Directors or Officers have not been selected, an If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners.	Title: or Officer. Incorporator must sign. pility Partnership:	-
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, If Directors or Officers have not been selected, an If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab	Title: or Officer. Incorporator must sign. pility Partnership:	
Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, If Directors or Officers have not been selected, an If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners. All others:	Title: or Officer. Incorporator must sign. pility Partnership:	19 F

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

(M	E LLC lust contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
·			
ARTICLE II - A			
The mailing addre	ss and street address of the	ne principal office of the Lim	ited Liability Company
Principal Office Address:		Mailing Address:	
6006 SUNSET ISLE	DRIVE	6006 SUNSET ISLE DRIV	Æ
WINTER GARDEN		WINTER GARDEN	
ET 2.1797		17 0 1700	
ARTICLE III - F	Registered Agent, Regist Company cannot serve as its own I active Florida registration.)	ered Office, & Registered A Registered Agent. You must designate	an individual or another
ARTICLE III - I	Company cannot serve as its own lactive Florida registration.) Florida street address of	ered Office, & Registered A Registered Agent. You must designate	an individual or another
ARTICLE III - I	Company cannot serve as its own lactive Florida registration.) Florida street address of PHILIP IDESON	ered Office, & Registered A Registered Agent. You must designate	an individual or another
ARTICLE III - I (The Limited Liability C business entity with an	Company cannot serve as its own lactive Florida registration.) Florida street address of PHILIP IDESON	ered Office, & Registered A Registered Agent. You must designate the registered agent are:	an individual or another
(The Limited Liability C business entity with an	Company cannot serve as its own I active Florida registration.) Florida street address of the PHILIP IDESON 6006 SUNSET ISLE DRIVE	ered Office, & Registered A Registered Agent. You must designate the registered agent are:	an individual or another
ARTICLE III - I (The Limited Liability C business entity with an	Company cannot serve as its own I active Florida registration.) Florida street address of the PHILIP IDESON 6006 SUNSET ISLE DRIVE	ered Office, & Registered A Registered Agent. You must designate the registered agent are: Jame	an individual or another

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

		_
WINTER GARDEN, FL, 34787		_
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	PHILIP IDESON 6006 SUNSET ISLE DRIVE WINTER GARDEN, FL. 34787	6006 SUNSET ISLE DRIVE WINTER GARDEN, FL, 34787 TAU SELVING MANAGEMENT SELVING MANAGEMEN

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)