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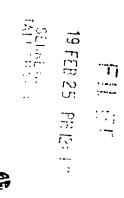
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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02/01/19--01022--002 **150.00



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COVER LETTER

TO: New Filing Section Division of Corpo				
SUBJECT: Fix My Damin	i Credit Group, LLC			
SOBJECT.	(Name of Rest	ahing Florida Lim	ited Com	pany)
				d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all correspo	ondence concerning	this matter to:		
Sasha Rodriguez				
((Contact Person)		_	
1.5	Firm Company)		-	
84 Brunswick Ln	(Address)	 	_	
Palm Coast, FL 32137	(, want = 1)			
info@fixmydamncredit.com	State and Zip Codes		_	
E-mail Address, (to be use For further information of	•			
Sasha Rodriguez		er (386	140617	754
(Name of Contact Pe	erson)	(Arza Code	(Dayı	time Telephone Number)
Enclosed is a check for the dollars and drawn on a baseline.			process	ed by this office must be payable in US
(\$25 for Conversion and	\$155 00 Filing Fees d Centificate of mus	S180.00 Filing and Certified Co		□S185 00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		New F Divisio P. O. F	iling Se on of Co Box 632	orporations.

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: Fix My Damn Credit Advertising Group, Inc.
(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)
December 21, 2018 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Fix My Damn Credit Group, LLC
(Enter Name of Florida Lunited Liability Company)
4. If not effective on the date of tiling, 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

 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 24th day of January	20 19	
Signature of Authorized Representative of Limi	ited Liability Company:	
Signature of Authorized Representative: fact R. Printed Name: Sasha Rodriguez	Citle: Owner	
Signature(s) on behalf of Other Business Entity:		
Signature: Park P. S		
Signature: A. R. Printed Name: Sasha Rogriguez	Title: Owner	
Signature: Printed Name:	Title:	
Signature:		
Signature: Printed Name:	Title:	
Signature:		
Signature: Printed Name:	_ Title:	
Signature: Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc	Officer. corporator must sign.	
<u>If Florida General Partnership or Limited Liabili</u> Signature of one Genera! Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		19 544
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	FED 25 PM



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Com	ipany is:
Fix My Damn Credit Group, LLC	
	ted Liability Company, "I. L.C.," or "I.L.C.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
84 Brunswick Ln	84 Brunswick Ln
Palm Coast, FL 32137	Palin Coast, FL 321.37
ARTICLE III - Registered Agent, Re The Limited Limitity Company cannot serve as its business entity with an active Florida registration.)	egistered Office, & Registered Agent's Signature; own Registered Agent, You must designate an individual or another
The name and the Florida street address	s of the registered agent are:
Sasha Rodriguez	
	Name

Name

84 Brunswick Ln

Florida street address (P.O. Box <u>NOT</u> acceptable)

 Palm Coas.
 FL 32137

 City
 Zip

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Sasha Rodriguez
	84 Brunswick Lu
	Palm Coast, FL 32137
(Use attachment if necessary)	
	·
	ריק ער
LE V: Other provisions, if any.	
	<u>A</u>
REQUIRED SIGNATURE:	
7)	
Park R. S.	
Signature of a member or	an authorized representative of a member
 This document is executed in accordance 	with section 605,0203 (1) (b). Horida Statutes, Lam aware that
	ment to the Dengament of State constitutes a third decree follows
 any false information submitted in a docur 	ment to the Department of State Constitutes a time degree retory
any false information submitted in a docur as provided for in 5.317.155, F.S.	ment to the Department of State Constitutes a time degree tensity
any false information submitted in a docur as provided for in \$.317.155, F.S. Sasha Rodriguez	
any false information submitted in a docur as provided for in \$.317.155, F.S. Sasha Rodriguez	ped or printed name of signee

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)