# 

(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:





05/20/19--01032--005 \*\*155.00



### **COVER LETTER**

TO:	New Filing Se Division of Co				
SHRI	ECT. GARDEN	SOLUTIONS ACCOUNT	TING FIRM, LLC		
SOBJ	EC1	(Name of Res	ulting Florida Limit	ed Com	pany)
			_		I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	return all corre	spondence concerning	g this matter to:		
FREDI	ERICK DENSON				
		(Contact Person)			
GARD	EN SOLUTIONS,	INC			
		(Firm/Company)			
20401	NW 2ND AVE SU	IITE 206			
-		(Address)	- · · ·		
MIAM	GARDENS, FL	33169			
	(C	ity, State and Zip Code)			
FRED.	DENSON1@GMA	AIL.COM			
E-n	nail Address: (to be	used for future annual rep	port notifications)		
For fu	rther informatio	on concerning this mat	ter, please call:		
FREDI	ERICK DENSON		_at ( <sup>954</sup>	668-3	286
	(Name of Contac	ct Person)	(Area Code)	(Dayt	time Telephone Number)
		or the following amou a bank located in the l	•	rocess	ed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles inization)	■\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New I Divisi Clifto 2661	ET ADDRESS Filing Section on of Corporati n Building Executive Center assee, FL 3230	ons er Circle	New Fi Divisio P. O. B	ling Se n of Co ox 632	orporations

#### **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.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  ARDEN SOLUTIONS, 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.)
Fi	rst organized, formed or incorporated under the laws of FLORIDA  (Enter state, or if a non-U.S. entity, the name of the country)
•	(Enter state, or if a non-U.S. entity, the name of the country)
on	12/18/2013
	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
G.	ARDEN SOLUTIONS ACCOUNTING FIRM, LLC
_	(Enter Name of Florida Limited Liability Company)
4.	If not effective on the date of filing, enter the effective date:
(T th <u>No</u>	The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after e date this document is filed by the Florida Department of State.)  one: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cument'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.

2019 HAY 20 AM 8: 00

Signed th	nis 3 day of MAY	20_19
	e of Authorized Representative of Limi	
Signature Printed N	e of Authorized Representative:	
<u>Signatur</u>	e(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature	- Tomas	·
Printed N	ame: FREDERICK DENSON	Title: OWNER
Signature	•	
Printed N	ame:	Title:
Signature	ame:	
Printed N	lame:	Title:
Signature	::	
Printed N	e:	Title:
Signature	ame:	7:1
Printed N	lame:	litle:
Signature	::	
Printed N	lame:	Title:
Signature	a Corporation: c of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an In	
	a General Partnership or Limited Liabilic of one General Partner.	ity Partnership:
	a Limited Partnership or Limited Liabili es of ALL General Partners.	ty Limited Partnership:
All other Signature	es: e of an authorized person.	
Fees:		
F	Articles of Conversion: Tees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

GARDEN SOLUTIO	ONS ACCOUNTING FIRM, L	LC		
		iability Company, "L.L.C.," or "LLC.")	_	
ARTICLE II - A			Communication	
The mailing addre	ess and street address of the	ne principal office of the Limited Liability	Company is.	
Principal Office	Address:	Mailing Address:		
20401 NW 2ND AV	E	20401 NW 2ND AVE		
SUITE 206		SUITE 206		
MIAMI GARDENS,	, FL 33169	MIAMI GARDENS, FL 33169		
(The Limited Liability) business entity with an		ered Office, & Registered Agent's Signa Registered Agent. You must designate an individual or a the registered agent are:		
(The Limited Liability) business entity with an	Company cannot serve as its own nactive Florida registration.)	Registered Agent. You must designate an individual or a		
(The Limited Liability) business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of FREDERICK DENSON	Registered Agent. You must designate an individual or a		
(The Limited Liability) business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of FREDERICK DENSON	Registered Agent. You must designate an individual or a the registered agent are:  Name		
(The Limited Liability) business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of FREDERICK DENSON  6110 NW 27TH ST UNIT 1	Registered Agent. You must designate an individual or a the registered agent are:  Name		
(The Limited Liability) business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of FREDERICK DENSON  6110 NW 27TH ST UNIT 1	Registered Agent. You must designate an individual or a the registered agent are:  Name  (P.O. Box NOT acceptable)  FL 33023		
(The Limited Liability) business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of FREDERICK DENSON  6110 NW 27TH ST UNIT I Florida street address	Registered Agent. You must designate an individual or a the registered agent are:  Name  (P.O. Box NOT acceptable)		

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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	
AMBR	FREDERICK DENSON
	20401 NW 2ND AVE STE 206
	MIAMI GARDENS, FL 33169
(I lee attaches ut if a coccurry)	
(Use attachment if necessary)	
ICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
MEQUILED STORMED	
- Leve	a-04.0
Signature of a member or	an authorized representative of a member
I his document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware the iment to the Department of State constitutes a third degree felor
as provided for in s.817.155, F.S.	ment to the Department of State constitutes a time degree leads
as provided for in s.o. 7.155, 1.5.	
FREDERICK DENSON	
	ped or printed name of signee
.,	Filing Page

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)