U9000 14297

(Requestor's Name)
(Address)
(Address)
(and and)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(4-11-11-11-11-11-11-11-11-11-11-11-11-11
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



U5/15/19--01020--015 **150.00

U4/U8/19--U1016--C22 **150.00



COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: C HONDA CONSULTING LLC (Name of Resulting Florida Limited Company)		
(Name of Resulting Florida Limited Company)		
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605		
Please return all correspondence concerning this matter to:		
CHRISTOPHER HONDA (Contact Person) C HONDA CONSULTING LLC (Firm/Company)		
(Contact Person)		
C HONDA CONSULTING LLC		
(Firm/Company)		
Z8 FOXCROSS AVE (Address)		
(Address)		
SAINT AUGUSTINE FL 32092		
SAINT AUGUSTINE FL 32092 (City, State and Zip Code)		
E-mail Address: (to be used for future annual report notifications)		
E-mail Address: (to be used for future annual report notifications)		
For further information concerning this matter, please call:		
CHRISTOPHER HONDA at (309) 6349779		
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount: (All checks processed by this office mudollars and drawn on a bank located in the United States)	st be payable in US	
\$150.00 Filing Fees (\$25 for Conversion & S125 for Articles of Organization) \$\begin{array}{cccccccccccccccccccccccccccccccccccc		
STREET ADDRESS: MAILING ADDRESS:		
New Filing Section New Filing Section		
Division of Corporations Division of Corporations	· · · · · · · · · · · · · · · · · · ·	
Clifton Building P. O. Box 6327		

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301



Returned with forms corrected forms 2 Ho. 4/25/2015 FLORIDA DEPARTMENT OF STATE

Division of Corporations

April 16, 2019

CHRISTOPHER HONDA 28 FOXCROSS AVE SAINT AUGUSTINE, FL 32092

SUBJECT: C HONDA CONSULTING LLC

Ref. Number: W19000037425

We have received your document for C HONDA CONSULTING LLC and your check(s) totaling \$150.00. However, the document has not been filed and is being retained in this office for the following:

The incorrect form was submitted to our office.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 419A00007645

Jessica A Fason Regulatory Specialist II

www.sunbiz.org

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 \(\text{\conversion} \) \(\c	,
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a SINGLE MEMBER LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust.	etc.
First organized, formed or incorporated under the laws of 144/015 (Enter state, or if a non-U.S. entity, the name of the country)	
on MAY 12, 2018 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization C HONDA CONSULTING LLC	n:
(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 at 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 amoun	to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

ZOIOMAY 16 PM 4: 50
SECRETIANY OF STATE

Signed this 25 th day of APRIL	_20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: CPrinted Name: CHRISTOPHER HONDA	M Hal Title: MANAGER
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature:CL_H&L Printed Name:CHEISTOPHERHONDA	44 ()
Printed Name: <u>CHEISTOPHER HONDA</u>	Title:
Signature:Printed Name:	
Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLE IV-

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

<u>l'itle:</u>	Name and Address:
'AMBR" = Authorized Member 'MGR" = Manager MGR	CHRISTOPHER HONDA
	28 FOXCEOSS AVE
	CHRISTOPHER HONDA 28 FOXCROSS AVE SAINT AUGUSTINE FL 32
III.	
Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Ce Hor	
Signature of a member or a	an authorized representative of a member
Signature of a member or a This document is executed in accordance	
Signature of a member or a This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S.	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Signature of a member or a This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S.	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware that
Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. CHRISTOPA Typ	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony printed name of signee Filing Fees
Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. CHRISTOPA Typ	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee Filing Fees f Organization and Designation of Registered Age:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

C HONDA CONSULTING LLC
(Must contain the words "Limited Liability 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:
28 FOXCROSS AVE SAINT AUGUSTINE FLORIDA 32092 28 FOXCROSS AVE SAINT AUGUSTINE FLORIDA 32092
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
CHRISTOPHER HONDA. Name
Name
28 FOXCROSS AVE
Florida street address (P.O. Box NOT acceptable)
SAINT AUGUSTINE FL 32092 City Zip
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 a 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)
Registered Agent's Signature (REQUIRED)

(CONTINUED)