L19000176793

	(Requestor's Name)				
(Address)					
	(Address)				
	(City/State/Zip/Phone #)				
PICK-UF	P WAIT	MAIL			
	(Business Entity Name)				
	(Document Number)				
Certified Copies	Certificates of	Status			
Special Instructions	to Filing Officer:				
1.019-6	3478				
L					



900330853839

Q8/28/19--01017--028 **150.00

PILED
2019 JUN 26 AH II: 32
SECRETARY OF STATE

Office Use Only

JUL 1 9 2019

K Brumbley

COVER LETTER

Division of C	orporations				
SUBJECT: KDM W	ealth Management LLC				
30bit.e 1.	(Name of Re	sulting	Florida Limite	ed Con	npany i
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this	matter to:		
Klaus D Miodov					
	(Contact Person)				
Calton & Associates					
	(Firm/Company)				
29250 US Highway 19 N	V. Lot 414				
	(Address)		Ng.de.		
Clearwater, FL 33761					
	Tity, State and Zip Code)				
oneiron3@msn.com	, , , , , , , , , , , , , , , , , , , ,				
	e used for future annual re	port n	otifications)		
For further informati	on concerning this ma	tter. p	please call:		
Klaus D. Miodov		at (405	640-7	7109
(Name of Conta	et Person)	_ `	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the			ocess	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 Filing I Certified Copy		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:		MAILI	NG A	ADDRESS:
New Filing Section			New Fil		
Division of Corporat	ions				orporations
Clifton Building	on Claud .		P. O. Be		
2661 Executive Cent Tallahassee, FL 3236			Taffahas	isee. I	FL 32314

TO: New Filing Section

Articles of Conversion

For

"Other Business Entity"

Into

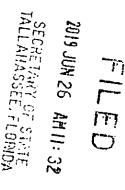
Florida Limited Liability Company

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: K D M Wealth Management LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Oklahoma (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)
June 21, 2006 on
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:
K D M Wealth Management 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.



	,
	•
Stymod Rus 5 June	19
Signature of Authorized Representative of Livi	Fed Listellin Company:
Signations of statistic editions sentential Printed None Klaus Dieter Miodov	My DI Moder
Signaturees, on behalf of Other husiness Links.	
Princed Name - Klaus D. M.1-0-00-V	or Resident
Septiation.	
Printed (same)	File
Signature: Printed Same	Tide
Signature Printed Nume:	Title:
Signature. Printed Name:	Tule:
Signature Printed Name	Title:
(f Fiorida Corporation: Signature of Chairman Vice Chairman, Director, or II Directors or Officers have not been selected, an Ir	
If Florida General Partnership of Limited Liabil Signature of one General Partner	ity Partnership:
H Florida Limited Partnership or Limited Liabil Signatures of ALL General Pariners	ity Limited Partnership.
All others: Signature of an authorized person	
<u>Lexi</u>	
Tarticles of Conversion Lee for Elevation Article of Copunctation Lemanca Cong Lem George of Status	\$25 pm \$12 \$ pm \$ (0.000 pm) pm; \$5 00 m pm;

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
KDM Wealth Management LLC	
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "L.E.C.")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
29250 US Highway 19 N, Lot 414	29250 US Highway 19 N, Lot 414
Clearwater, FL 33761	Clearwater, FL 33761
ARTICLE III - Dogistorod Agent Dogistorod	Office & Decistand Agent's Cimeture
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist	ered Agent. You must designate an individual or another
business entity with an active Florida registration.)	
The name and the Florida street address of the r	egistered agent are:
Klaus D. M	liodov
Name	, , , , , , , , , , , , , , , , , , ,
2025/ 11 C L	1gh way 19 N. Lot 414
	//
Florida street address (P.O	. Box <u>NOT</u> acceptable)
('learwater	FL 3376/
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)

	13	•	r.	•		٠,	1	•	,
A	к		Ľ	ι	Ι.	r.	1	``	′ -

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 Manager	Sandra L Miodov				
Manager	29250 US Highway 19 N. Lot 414 Clearwater, FL 33761				
					
(Use attachment if necessary)					
(3.32 3.33.23)					
ARTICLE V: Other provisions, if any.					
/					
$\sqrt{-\frac{\text{REQUIRED}}{\text{SIGNATURE}}}$					
Sandra L. Windle	V				
This document is executed in accordance	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				
as provided for in ✓N17 155 F.S.	Miodov				
	ped or printed name of signee				

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)