

L19000257945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

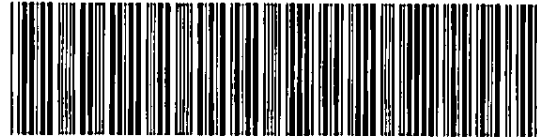
(Document Number)

Certified Copies _____ Certificates of Status _____

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N SAMS
OCT 28 2019



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FILED
2019 OCT 25 AM 11:00
SEC. DEPT. OF TREASURY
FBI WASHINGTON, D.C.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2019

CYNTHIA CINDI CROSS

6360 LONGLEAF PINE DRIVE
JUPITER, FL 33458 US

SUBJECT: CROSS GLOBAL MANAGEMENT, LLC
Ref. Number: W19000091386

FILED
2019 OCT 25 AM 11:00
IN COMPLIANCE WITH
F.S. 607.01(1)

We have received your document for CROSS GLOBAL MANAGEMENT, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There has to be a date state for line 2 on the Conversion Form.

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.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 019A00021208

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CROSS GLOBAL MANAGEMENT, LLC
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

CYNTHIA "CINDI" CROSS
(Contact Person)

CROSS GLOBAL MANAGEMENT
(Firm/Company)

6360 LONGLEAF PINE DRIVE
(Address)

JUPITER, FL 33458
(City, State and Zip Code)

CCROSS@CROSSGLOBALMGMT.COM
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

CINDI CROSS at (203) 856-9447
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☒ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☐ \$185.00 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
2019 OCT 25 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

CROSS GLOBAL MANAGEMENT, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a CROSS GLOBAL MANAGEMENT, 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 CONNECTICUT
(Enter state, or if a non-U.S. entity, the name of the country)

on MAY 15 2014
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

CROSS GLOBAL MANAGEMENT, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: 10/4/2019

(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.)

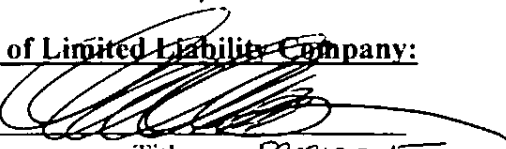
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

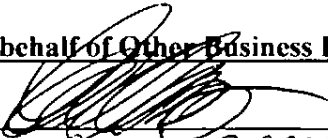
Signed this 28 day of SEPTEMBER 2019.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: 

Printed Name: CYNTHIA P CROSS Title: PRESIDENT

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: 

Printed Name: CYNTHIA P CROSS Title: PRESIDENT

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

RECEIVED
FEBRUARY 11 2020
TALLAHASSEE, FL

2019 OCT 25 AM 11:00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CROSS GLOBAL MANAGEMENT, 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:

6360 LONGLEAF PINE DRIVE
JUPITER, FL 33458

Mailing Address:

6360 LONGLEAF PINE DRIVE
JUPITER, FL 33458

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:

CYNTHIA P CROSS

Name

6360 LONGLEAF PINE DRIVE

Florida street address (P.O. Box **NOT** acceptable)

JUPITER

City

FL.

33458

Zip

SECRETARY OF STATE
ATTORNEY GENERAL

2019 OCT 25 AM 11:00

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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.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

CYNTHIA P CROSS
6360 LONGLEAF PINE DR
JUPITER, FL 33458

(Use attachment if necessary)

2019 OCT 25 AM 11:00
FILED
TALLAHASSEE, FL 32301
CLERK OF THE COURT

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

CYNTHIA P CROSS

Typed or printed name of signer

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)