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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Special Instructions to Filing Officer:

Certificates of Status _____

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CROSS CONSULTING SERVICES, 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:

FLOYD W. CROSS

(Contact Person)

CROSS CONSULTING SERVICES, LLC

(Firm/Company)

1218 ASHLAND AVE. S.E.

(Address)

PALM BAY, FL 32909

(City, State and Zip Code)

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

FLOYD W. CROSS at (330) 268-4026
(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 \$155.00 Filing Fees \$180.00 Filing Fees \$185.00 Filing Fees.
(\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and
& \$125 for Articles Status Certificate of Status
of Organization)

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

Signed this 1st day of October 2019

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Floyd W. Cross
Printed Name: FLOYD W. CROSS Title: MEMBER

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

Signature: Floyd W. Cross
Printed Name: FLOYD W. CROSS Title: MEMBER

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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CROSS CONSULTING SERVICES, 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:

1218 ASHLAND AVE. S.E.
PALM BAY, FL 32909

Mailing Address:

1218 ASHLAND AVE. S.E.
PALM BAY, FL 32909

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:

FLOYD W. CROSS

Name

1218 ASHLAND AVE. S.E.

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

PLAM BAY

FL 32909

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..

Floyd W. Cross
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

"MBR" = MEMBER

Name and Address:

FLOYD W. CROSS, MBR

1218 ASHLAND AVE. S.E.

PALM BAY, FL 32909

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

Floyd W. Cross

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.

Floyd W. Cross

Typed 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)