# 120000016541

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

CAN 2 3 2020

T. SCOTT



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01/02/20--01018--001 \*\*150.00



# COVER LETTER

Division of Corporations
SUBJECT: Blue Panda Consulting 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:
Douglas L. O'Keefe (Contact Person) O'Keefe Law, P.A. (Firm/Company)
1111 Brickell Avenue, Suite 1300 (Address)
City. State and Zip Code)  Old Keerle O Jokewil Gav. Com  E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person)  at (305) 213.9029  (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)
S\$150.00 Filing Fees (\$255 for Conversion and Certificate of Status  S\$180.00 Filing Fees and Certified Copy (Certified Copy and Certificate of Status)
Mailing Address:  New Filing Section  Division of Corporations  P.O. Box 6327  Street Address:  New Filing Section  Division of Corporations  The Centre of Tellshamers

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32314

### Articles of Conversion For

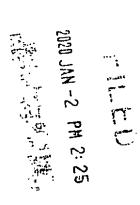
# "Other Business Entity"

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.

(Enter Name of Other Business Entity immediately prior to the filing of the Articles of Conversion is:  (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
on (date of organization, formation or incorporation)
(vace of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Blue Panda Coase Iting CCC (Enter Name of Florida Limited Limited Limited Company)
(Enter Name of Florida Limited Elability 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.



Signed this 30th day of December	20 <u></u>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: X Printed Name: Judd Brazer	Mrss
Signature(s) on behalf of Other Business Entity:	
Signature: X MANNAN -	
Signature: X MANNAME.  Printed Name: Bodd Brazer	Title: President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Intle:
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title
	ritte.
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	Officer
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

— IS	Blue Panda Consultation of the Panda Consultation of the words "Limited L	The LLC iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ad The mailing address		he principal office of the Limited Liability Comp	any is:
Principal Office A	Address:	Mailing Address:	
15972 Sw Pemboke P	15# Street Thes, FL 33027	Same	
business entity with an a	active Florida registration.)	Registered Agent. You must designate an individual or another	
The name and the I	Florida street address of		
The name and the I		the registered agent are:  Left, Esq.  Name	
The name and the I	Douglas Of	leefe, Esq.	
The name and the I	Douglas Of	Leefe, Esq.  Name  Averve, Suite 1300  (P.O. Box NOT acceptable)	
The name and the I	Douglas Of	Leefe, Esq.  Name  Averve, Suite 1300  (P.O. Box NOT acceptable)	
The name and the I	Douglas Of	leefe, Esq.	

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2020 JAN -2 PM 2: 26

(Use attachment if necessary)  REQUIRED SIGNATURE:  X July 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 awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S.  Judy Brazer  Typed or printed name of signee	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
REQUIRED SIGNATURE:  X 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 awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S.	"MGR" = Manager MGR	15972 Sw 15457
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any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S.	REQUIRED SIGNATURE:	
Judd Brazer Typed or printed name of signee	any false information submitted in a document	with section 605,0203 (1) (b). Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo
Typed or printed name of signee		
Filing Fees	Judd Bruzer	

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

ARTICLE IV-

Company: