120000034979

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

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January 23, 2020

JOHN DRECHNY 555 THE ESPLANADE N 701 VENICE, FL 34285

SUBJECT: CAPTURE CONSULTING, LLC

Ref. Number: W20000000030

We have received your document for CAPTURE CONSULTING, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

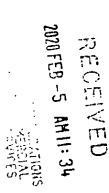
The Certificate of Conversion must be signed by an authorized person.

Please return the corrected original and one copy of 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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 120A00001643



COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Capture Consulting LLC (Name of Resulting Florida Limited Company)	
The enclosed Articles of Conversion. Articles of Organization, and fees are submitted to convert an "O Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.	ther
Please return all correspondence concerning this matter to:	
Capture Consulting LLC (Firm/Company)	
555 The Esplanade N 701	
Venice, FL 34285 (City, State and Zip Code)	
E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
Tohn Drechny at (476) 531-4731 (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 dollars and drawn on a bank located in the United States)	US
∑S 150.00 Filing Fees □S 155.00 Filing Fees □S 180.00 Filing Fees □S 185.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) Status □S 180.00 Filing Fees Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section Street Address: New Filing Section	

Tallahassee, Fl. 32314

P.O. Box 6327

Division of Corporations

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

For "Other Business Entity"

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: (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Unter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Arkansas (Enter state, or if a non-U.S. entity, the name of the country)
on May 24, 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: Cacture Consulting LLC (Enter Name of Florida Limited Liability Company)
(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.

Signed this 10 day of January	20_20
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: John Printed Name: John Drechny	Title: President
Signature(s) on behalf of Other Business Entity:	
7 Signature: John Decker	Title: For CO. 1
Deleta Dech	1110.
Signature: Delous Ducky Printed Name: Debra Drechty	Title: Secretary
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	
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 In-	
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.	
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Capture Consulting, L.L.C.	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	

ARTICLE II - Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
555 The Scolanade N 701	555 The Esistenesde U701
Venace FL 3-1285	Venice FL 34285

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The I imited 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:

Sohn Drechny
Name

Solve Solve 10 10 |
Florida street address (P.O. Box NOT acceptable)

Ulunce FL 34285

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)

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

"AMBR" = Authorized Member "MGR" = Manager	John Diechny
	S55 The Esplandale, U 701 Venue, FC 34785
AMBR	Debra Drechny 555 The SSPIGNOIDE NO Verice FL 34285
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
•	
CLE V: Other provisions, if any.	2
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	nent to the Department of State constitutes a third degree felor
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as 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 tha ment to the Department of State constitutes a third degree feloring bed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)