L20000051812

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	.
Special Instructions to Filing Officer:	





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01/21/20--01088--007 **180.00

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COVER LETTER

TO: New Filing Section		
Division of Corporations		
SUBJECT: ECONOMIC RESEARCH &		
(Name of Rest	alting Florida Limited Cor	upany)
The enclosed Articles of Conversion, Articl Business Entity" into a "Florida Limited Lia		
Please return all correspondence concerning	this matter to:	
STUART A. ſELLER, ESQ.		
(Contact Person)		
STUART A. TELLER, P.A. (Firm/Company)		
7320 GRIFFIN ROAD, SUITE 216		
(Address)		
DAVIE, FLORIDA 33314		
(City, State and Zip Code)		
stuart@tellerlawoffice.com E-mail Address: (to be used for future annual rep	nort notifications)	
For further information concerning this mat	ter, please call:	
STUART A. TELLER		27-3383
(Name of Contact Person)	(Area Code) (Da	vtime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the		sed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ■ \$150.00 Filing Fees and Certificate of Status	□\$180,00 Filing Fees and Certified Copy	□\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Address:		4 Address:
New Filing Section		Filing Section
Division of Corporations		sion of Corporations
P.O. Box 6327 Tallahassee, FL 32314		Centre of Tallahassee N. Monroe Street, Suite 810
rananassee, r t. Jajit	_41.7	11, Montoe Street, Suite 010

Tallahassee, FL 32303

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: ECONOMIC RESEARCH & ANALYSIS, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a FLORIDA CORPORATION (P1500007739)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of STATE OF FLORIDA
(Enter state, or if a non-U.S, entity, the name of the country)
on 01/27/2015 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ECONOMIC RESEARCH & ANALYSIS, LLC.
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: <u>DATE OF FILING</u> . (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.)
<u>Note:</u> 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 29 day of DECEMBER	2019
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:	demy Kny
Signature(s) on behalf of Other/Business/Entity:	· ·
Signature: Calculation of the Printed Name: VALDEMAR FOREJT	_ Title: _CEO.T.S.D
•	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Tranco : vanc.	11ttc
Signature:	eres at
Printed Name:	fille:
Signature:	
	T(11
	THIC.
Signature: Printed Name: 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.	Officer. corporator must sign.
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	Officer. corporator must sign, ty Partnership:
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. If Florida Limited Partnership or Limited Liabili	Officer. corporator must sign, ty Partnership:
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. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others:	Officer. corporator must sign, ty Partnership:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Com	pany is:	
ECONOMIC RESEARCH & ANAI	LYSIS, LLC.	
(Must contain the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Li	iability Company is:
Principal Office Address:	Mailing Address:	
319 AMHERST AVENUE SARASOTA, FL 34232	SAME	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)		
The name and the Florida street address	of the registered agent are:	20
_STUART ATELI	ER, P.A. Name	20 JAN 21
7320 GRIFFIN R	OAD, SUITE 216	- COS

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)

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

_DAVIE

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
_AMBR	VALDEMAR FOREJT 319 AMHERST AVENUE
	SARASOTA, FL 34232
	
(Use attachment if necessary)	
ICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	my tryt.
Signature of a member or	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware

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)

Typed or printed name of signee