L20000098224

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
AUTHORIZATION BY PHONE TO GORRIEGT ALIZE DATE 200 BOM AS A
signature w20000003110109

Office Use Only



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SECRETARY OF STATE

T. BURCH APR 8 2020

COVER LETTER

TO: New Filing S Division of O			·
SUBJECT:	I-Bi	2 Solution	is LLC
	(Name of Res	sulting Florida Limited Cor	npany')
			id fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all cor	respondence concernin	g this matter to:	
	(Contact Person) Solutions (Firm/Company)		
	H wick h		ite 130
mel bour	City. State and Zip Code)	2940	
geornali	us <u>o</u> i bi be used for future annual re	2 solutions	· Cam
For further informat	ion concerning this ma	tter, please call:	
Diane Lisa (Name of Cont	act Person)	at (<u>321</u>) 3 (Area Code) (Day	O1 - 3 S S S rtime Telephone Number)
	for the following amount 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)	□\$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
Mailing Ado New Filing S Division of O	Section	New	t Address: Filing Section ion of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

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 convertible following
"Other Business Entity" into a Florida Limited Liability Company in accordance with \$.805.1045. Florida Statutes. Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: I - Biz Solutions INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on 0109 2019 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
I-Biz Solutions LLC
(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 6 day of march	_20 <u></u> 20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: <u>Dic</u> Printed Name: <u>Dia no</u> Connelius	ne Counclus Tide: Director
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)
Signature: Diane Councius Printed Name: Diane Guetus	Title: Duecha
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	
Signature:Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL 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

ARTICLE	I	_	Name:				
****				_	_		

The name of the Limited Liability Company is:

Must contain the words "Limited Liability Company, "I. F. C." or "E. F. C."

ARTICLE II - Address:

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

Principal Office Address:

5300 North Wickham Rd

5uite 130

Melbourne FL 32940

Mailing Address:

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:

Name
Name
Name
Soo North Wickham Rd
Suita 130
Florida street address (P.O. Box NOT acceptable)

melbourne FL 32940
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)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address: Diene Coinelius					
MCK = Manager MCKR	6300 North Wilkham					
_	suite 130 melbiune FL 32940					
	matisionia PC \$5140					
	1202 141					
	O MAR					
	ARS A					
(Use attachment if necessary)	ی نے					
(See announced in the estate,)	TATE ORID					
CLE V: Other provisions, if any.	A J					
REQUIRED SIGNATURE:						
Diane Cornel	11.5					
DIANE CORRECT	<u> </u>					

ARTICLE IV-

as provided for in s.817.155, F.S.

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) S 5.00 Certificate of Status (Optional)