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(Re	questor's Name)	 	
(Ad	dress)		
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(Cit	ry/State/Zip/Phone	: #)	
PICK-UP	MAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
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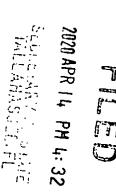
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COVER LETTER

TO: New Filing So Division of Co				
SUBJECT: Ardent O	·			
30bjec1	(Name of Res	ulting Florida Limite	ed Con	npany)
		•		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
Carol Frattura				
	(Contact Person)			
Ardent One				
	(Firm/Company)			
20170 Passagio Dr.				
	(Address)			
Venice, Fl. 34293				
((City, State and Zip Code)			
CM.Frattura@gmail.co	m			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
Carol Frattura	-	941 _at (456.1	1560
(Name of Conta	et Person)	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the		roces	sed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	□\$180,00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add	ress:		<u>Stree</u>	t Address:
New Filing So	ection			Filing Section
Division of C P.O. Box 632				ion of Corporations Tentre of Tallahassee
T,O, DOX 032	1		THULL	CHUC OF LandidSSCC

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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 Afficies of Conversion is: Ardent One, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (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)
2-8-2017 on
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Ardent One 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.)
<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 3 day of April	20_2 <i>O</i>
Signature of Authorized Representative	of Limited Liability Company:
Signature of Authorized Representative: E Printed Name: Carol Frattura	11 14
Signature of Authorized Representative:	Title: Manager Member
Printed Name: Calor Flattora	FIIIe. Manager Weinber
Signature(s) on behalf of Other Business E	Entity: [See below for required signature(s)]
Signature: \(\fuiffy \)	Title: Manager Member
Printed Name: Victor Frattura	Title: Manager Member
	Title: Manager Member
Signature:	Tit Managas Mambas
Printed Name: Carol Frattura	Title: Manager Member
Cionatura	
Signature:Printed Name:	Title:
Timed Fully.	
Signature:	
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
e:	
Signature: Drinted Name:	Title:
Frinted Name.	110c.
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Dire	ector, or Officer.
If Directors or Officers have not been selected	
If Florida General Partnership or Limited	
Signature of one General Partner.	
tern in the same and the same	LEC 199au Francis de Donamonaldon
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	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

\$30.00 (Optional) \$5.00 (Optional) Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Comp	pany is:
Ardent One LLC (Must contain the words "Limite	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 Liability Company is:
Principal Office Address:	Mailing Address:
20170 Passagio Dr.	20170 Passagio Dr.
Venice, Fl. 34293	Venice, Fl. 34293
	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Name
20170 Passagio Dr.	
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
Venice	FL ³⁴²⁹³
City	Zip
liability company at the place desig registered agent and agree to act in th statutes relating to the proper and co accept the obligations of my position	ent and to accept service of process for the above stated limited gnated in this certificate. I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all omplete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-

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

Name and Address:					
Venice, Fl. 34293					
Carol Frattura					
20170 Passagio Dr.					
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	••				
	Victor Frattura 20170 Passagio Dr. Venice, Fl. 34293				

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.

Carol Frattura

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)