L20000109649

(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:

Office Use Only



600341187646

03/06/20--01004--028 **185.00

D O'KEEFE APR 2: 2020 20 APR 20 PM 2: 39

W20-29366



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 4, 2020

ANTHONY J TULINO CREATIVE PROFIT SOLUIONS, LLC 9831 DEL WEBB PARKWAY UNIT 4203 JACKSONVILLE, FL 32256

SUBJECT: CREATIVE PROFIT SOLUTIONS, LLC

Ref. Number: W20000029366

We have received your document for CREATIVE PROFIT SOLUTIONS, LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The business entity that you are forming cannot serve as its own registered agent. You may designate an individual or another business entity with an active registration or filing with this office. The newly designated registered agent must have a Florida street address and must sign accepting the designation. Please amend your document accordingly.

Please return 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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 220A00006082

20120 APR 20 PM 4: 26



March 20, 2020

ANTHONY J TULINO CREATIVE PROFIT SOLUIONS, LLC 9831 DEL WEBB PARKWAY UNIT 4203 JACKSONVILLE, FL 32256

SUBJECT: CREATIVE PROFIT SOLUTIONS, LLC

Ref. Number: W20000029366

We have received your document for CREATIVE PROFIT SOLUTIONS, LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the Articles of Conversion. A required signature is missing.

Please return 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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 220A00006082

2020 MAR 30 AM 11: 28

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Creative Profit Solutions, LLC		
	esulting Florida Lim	ited Company)
The enclosed Articles of Conversion, Arti Business Entity" into a "Florida Limited I		tion, and fees are submitted to convert an "Other sy" in accordance with s. 605.1045, F.S.
Please return all correspondence concerni-	ng this matter to:	
Anthony J Tulino		
(Contact Person)		_
Creative Profit Solutions, LLC		
(Firm/Company)		_
9831 Del Webb Parkway Unit 4203		
(Address)		_
Jacksonville, Fl 32256		
(City, State and Zip Code)		_
ajt717@yahoo.com		
E-mail Address: (to be used for future annual r	report notifications)	-
For further information concerning this m	atter, please call:	
Anthony Tulino	at (²¹⁵	760-4360
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the		processed 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 and Certified Co	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Creative Profit Solutions, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Effet entity type: Example: Corporation, infinited partnership, general partnership, common law of ousiness 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)
June 4, 2015 Per IRS Doc Attached
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Creative Profit 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 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	3rd	_ day of <u>March</u>	20		
Signature	of Author	ized Representative of Lin	nited Liability Company:		
C: .	C A .1 .		Title: President		
Signature of	of Authoriz	ed Representative:	Tida: President		
rinted Nai	me: Androny	J Tulino	Title: ryesident		
Signature(s) on beha	f of Other Business Entity:	[See below for required signature(s)]		
Signature:		(Andrew	Y Title: 7,2 esident	~	
Printed Na	me: A_{N}	TULINO	v Title: 7,2 esident	<i>/</i> -	
		•		•	
Signature:			Title:	_	
Printed Nai	me:	·	I itle:		
Signature:					
Printed Na	me:		Title:		
Ciomatumo					
Printed Nat	me.		Title:	_	
Timed Iva		· · · · · · · · · · · · · · · · · · ·	11110.		
Signature:					
Printed Nar	me:		Title:		
Signature					
Printed Nar	me:		Title:		
If Florida		o <u>n:</u> , Vice Chairman, Director, o	r Officer		
		s have not been selected, an I			
		· · · · · · · · · · · · · · · · · · ·	b		
		rtnership or Limited Liabi	lity Partnership:		
Signature o	or one Gene	ral Partner.			٥,
		rtnership or Limited Liabi neral Partners.	lity Limited Partnership:	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	20 AFR
All others:				,	20 1
Signature o	t an author	zed person.		• • • • • • • • • • • • • • • • • • • •	<u> </u>
Fees:					2: 47
Art	icles of Co	nversion:	\$25.00		
Fee	s for Florid	la Articles of Organization:	\$125.00		
Cer	tified Copy	<i>'</i> :	\$30.00 (Optional)		
Cer	tificate of	Status:	\$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			•
The name of the Limited Liability Comp	pany is:		
Creative Profit Solutions, LLC			
	ed Liability Company, "L.L.C.," or "LLC.")		
(was contain the words Limite	ed Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:	•		
The mailing address and street address o	of the principal office of the Limited Liab	bility Cor	nnany ie
	•		iipuity 13.
Principal Office Address:	Mailing Address:		
9831 Del Webb Parkway Unit 4203	9831 Dal Wahh Bartanan		
Jacksonville, FI 32256	9831 Del Webb Parkway Unit 4203		
	Jacksonville, FI 32256	 -	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of	wn Registered Agent. You must designate an individu	Signaturi al or anothe	:: r
			•
Dealer Mobile Marketin			20
	Name	_ :	٠ بر
541 Morgan Wood Driv	ve		
	ss (P.O. Box NOT acceptable)	-	- 20 - 20
Deland	FL 32724		
City	Zip	•	1.5
	•		<u></u>
registered agent and agree to act in this statutes relating to the proper and com accept the obligations of my position	and to accept service of process for the cated in this certificate, I hereby accept the capacity. I further agree to comply with applete performance of my duties, and I am a regimered agent as provided for in Classics Signature (REQUIRED)	e appoints the provis	ment as sions of all
(50)	A POTENTIAL PROPERTY.		

A	D	TI	C1	L.	IV	_
ж	ĸ				ıv	-

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

Anthony J Tulino

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	A 11 1 T 11
AMBR	Anthony J Tulino
	9831 Del Webb Parkway Unit 4203
	Jacksonville, Fl 32256
	20
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	20.20
	• •
RTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	Le
	~
Signature of a marshar ar	an authorizad nomenaantativa af a mass-b
This document is avacuted in accordance	an authorized representative of a member with section 605.0203 (i) (b). Florida Statutes. I am aware that

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)

any false information submitted in a document to the Department of State constitutes a third degree felony