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COYER LETTER : TO: New Filing Section' Division of Corporations SUBJECT: iLotus, LLC (Name of Resulting Florida Limited Company) The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other

Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

| Latarpha S. Miles | 0 |
|---|----------------------------------|
| (Contact Person) | - MAY |
| (Firm/Company) | <u> </u> |
| 3801 Crown Point Road, Unit 2223 | خ |
| (Address) | ~~ ~~ |
| Jacksonville, FL 32257 | |
| (City, State and Zip Code) | |
| Latarpha.miles@citizensfla.com | |
| E-mail Address: (to be used for future annual report notification | ons) |
| For further information concerning this matter, please of | call: |
| Paul Bucci at (904 | 264-1665 |
| (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 US dollars and drawn on a bank located in the United States)

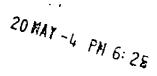
S150.00 Filing Fees □\$155.00 Filing Fees □\$180.00 Filing Fees ☐\$185.00 Filing Fees, (\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and & \$125 for Articles Status Certificate of Status of Organization)

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

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: Lotus Claims Consulting, LLC |
|---|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a |
| (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) |
| 12/19/2018 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: iLotus, 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 1 day of May | |
|---|--|
| Signature of Authorized Representative of Lim | nited Liability Company: |
| Signature of Authorized Representative: Printed Name: Latarpha S. Miles | Title: Manager |
| Signature(s) on behalf of Other Business Entity: | |
| Signature: | Wes |
| Printed Name: Latarpha S. MILES | _ Title: Manager 2 |
| Signature: Printed Name: | |
| Signature:Printed Name: | Tisla |
| | |
| Signature: Printed Name: | Title: |
| Signature: : Printed Name: : | Title: |
| 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 Liabilisticature of one General Partner. If Florida Limited Partnership or Limited Liabilisticatures of ALL General Partners. | corporator must sign. |
| 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

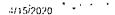
| ARTICLE I - Name: | |
|--|--|
| The name of the Limited Liability Company is | S: |
| | 4 |
| iLotus, LLC | |
| (Must contain the words "Limited Liabil | lity Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: | + |
| The mailing address and street address of the | orincipal office of the Limited Liability Companyis: |
| | න |
| Principal Office Address: | Mailing Address: |
| 3801 Crown Point Road, Unit 2223 | 3801 Crown Point Road, Unit 2223 |
| Jacksonville, FL 32257 | Jacksonville, FL 32257 |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the | istered Agent. You must designate an individual or another |
| Latarpha S. Miles | |
| Nan | ne |
| 3801 Crown Point Road, Unit 2 | 2223 |
| Florida street address (P.0 | O. Box NOT acceptable) |
| Jacksonville !- | FL 32257 |
| City | Zip |
| 1 | |

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)

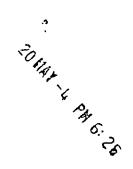
(CONTINUED)

| <u> Fitle:</u> | Name and Address: |
|--|---|
| 'AMBR" = Authorized Member 'MGR" = Manager | |
| MGR | Latarpha S. Miles |
| - | 3801 Crown Point Road, Unit 2223 |
| | Jacksonville, FL 32257 |
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| Use attachment if necessary) | |
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| LE V: Other provisions, if any. | |
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| REQUIRED SIGNATURE: | |
| SIGNATURE. | atash & mis |
| | alanger () |
| <i>V</i> : | |
| This document is executed in accordance any false information submitted in a document of the submitted in accordance any false information of the submitted in accordance and submitted i | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felony |
| as provided for in s.817.155, F.S. | |
| | |









Franchise Tax Account Status

As of: 04/15/2020 09:07:31

This page is valid for most business transactions but is not sufficient for filings with the Secretary of State

LOTUS CLAIMS CONSULTING, LLC

Texas Taxpayer Number 32069226648

Mailing Address 3801 CROWN POINT RD UNIT 2223 JACKSONVILLE, FL 32257-7515

Q Right to Transact Business in ACTIVE

Texas

State of Formation TX

Effective SOS Registration Date 12/19/2018

Texas SOS File Number 0803191309

Registered Agent Name REGISTERED AGENTS INC.

Registered Office Street Address 5900 BALCONES DRIVE, SUITE 100 AUSTIN, TX 78731