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	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
<u> </u>	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instruction	s to Filing Officer:	
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: TBIS Consulting, 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:
Charles Rowley (Contact Person)
IBIS Consulting, L.L.C. (Firm/Company)
Boc. 4 RATIN FL 33433 (City, State and Zip Code)
Boc A RATIN FL 33433 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (609) 933-5090 (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)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\begin{array}{c} \$150.00 Filing Fees and Certificate of & \$180.00 Filing Fees and Certified Copy & \$185.00 Filing Fees

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

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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:
IBIS Consulting, L.L.C. (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Linked Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of <u>New Tersey</u> (Enter state, or if a non-U.S entity, the name of the country)
on 13/18/2000 (ederal) in MT on 1/1/2001 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
IBIS Consulting, 4.4. C. (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: Ching Clade. (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 15 day of June	20_20
Signature of Authorized Representative of Limite	
Signature of Authorized Representative:	Title: MANAGER
Signature(s) on behalf of Other Business Entity: [S	
Signature: Marles Robley Printed Name: CHARLES ROBLEY	Title: <u>MANAGER</u>
Signature:Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	_Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y 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:

IBIS Consulting, L.	ed Liability Company, "L.L.C.," or "LLC.")
(was contain the words - Limb	ed that they company, E.E.C., or EEC.)
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:
23362 TOFFE CIT BOCA FATON, FL 33433	BOCK PATEN, FL 33433
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its obusiness entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another.
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an individual or another.

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)

(CONTINUÉD)

A	RT:	L I	IV.
-	R I	 . r. l	

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

Title:	Name and Address:
"AMBR" = Authorized Member	_
$\frac{\text{MGR"} = \text{Manager}}{\text{MGR}}$	CHARLES ROWLEY 23362 TORRE CIR BOCA RATIN, FL 33433
	22362 TOPPE CIR
	BOCA PATIN IL 33433
	
	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
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CLE V: Other provisions, if any. //A REQUIRED SIGNATURE:	7
CLE V: Other provisions, if any.	7
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes. I am aware that the Department of State constitutes a third degree felor
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes, I am aware that the the Department of State constitutes a third degree felor
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)