L2000169604

(Req	uestor's Name)	1
(Add	ress)	
(Adda	ress)	
(City/	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	iness Entity Na	me)
(Doc	ument Number)
•	•	•
Certified Copies	Certificate	e of Statue
Certified Copies	Certificate	3 OI Olatus
Special Instructions to Fi	iling Officer:	

Office Use Only



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W20-50397





FLORIDA DEPARTMENT OF STATE Division of Corporations

May 21, 2020

EILEEN MULKEY EILEEN MULKEY, INC. 5651 NE 16 TERRACE FT. LAUDERDALE, FL 33334

SUBJECT: EILEEN MULKEY LLC Ref. Number: W20000050397

We have received your document for EILEEN MULKEY 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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

7676 0000

Letter Number: 920A00010309

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Eileen Mulkey LLC		
SUBJECT:	sulting Florida Limited (Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L		and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all correspondence concernir	ig this matter to:	
Eileen Mulkey		
(Contact Person)		
Eileen Mulkey LLC		
(Firm/Company)		
5651 NE 16 Terrace		
(Address)		
Ft Lauderdale, FL 33334		
(City, State and Zip Code)		
Eileen@EileenMulkey.com		
E-mail Address: (to be used for future annual re	eport notifications)	
For further information concerning this ma	atter, please call:	
Eileen Mulkey	at (954)	709-8571
(Name of Contact Person)		Daytime Telephone Number)
Enclosed is a check for the following amo dollars and drawn on a bank located in the		sessed 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 Fee and Certified Copy	Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ne Di Th 24	reet Address: Ew Filing Section vision of Corporations e Centre of Tallahassee 15 N. Monroe Street, Suite 810 Ilahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

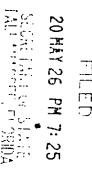
Into

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: Eileen Mulkey, Inc
(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)
September 12, 1995 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization : Eileen Mulkey 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 8th day of May	_ 20	
Signature of Authorized Representative of Limit	ed Liability Company:	
Signature of Authorized Representative:		-
Signature(s) on behalf of Other Business Entity: [3	See below for required signature(s)]	
Signature: Cleen Mulkey Printed Name: Eileen Mulkey	_Title: President	-
Signature: Ellen Mulkey Printed Name: Eileen Mulkey	Title: Secretary	_
Signature: Wilhey Printed Name: Eileen Mulkey	Title: Treasurer	- -
Signature:Printed Name:		
Signature:Printed Name:		
Signature: Printed Name:	_ Title:	- -
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	201
All others: Signature of an authorized person.		MAY 26
<u>Fees:</u>		PR 7
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	7: 25 STATE CRIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the I	me: Limited Liability Company	is:
Eileen Mulkey LL0	<u> </u>	
(M	fust contain the words "Limited Lia	oility Company, "L.L.C.," or "LLC.")
ARTICLE II - A	ddress:	
		principal office of the Limited Liability Company is
Principal Office	Address:	Mailing Address:
5651 NE 16 Terra	ice	5651 NE 16 Terrace
Ft Lauderdale, FL	33334	Ft Lauderdale, FL 33334
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Registe	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Registe Company cannot serve as its own Re n active Florida registration.) E Florida street address of the	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Registe Company cannot serve as its own Re active Florida registration.) Florida street address of the	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
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ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Registe Company cannot serve as its own Re n active Florida registration.) Florida street address of th Eileen Mulkey No. 5651 NE 16 Terrace	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Registe Company cannot serve as its own Re n active Florida registration.) Florida street address of th Eileen Mulkey No. 5651 NE 16 Terrace	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Registe Company cannot serve as its own Re n active Florida registration.) Florida street address of the Eileen Mulkey Na 5651 NE 16 Terrace Florida street address (I	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are: ame P.O. Box NOT acceptable)

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)

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A	RT	ICI	Æ	IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager Eileen Mulkey MGR	5651 NE 16 Terrace	
Ellech Mulkey MOIN	Ft Lauderdale, FL 33334	•
	<u></u>	
		- 8
(Use attachment if necessary)		125
3,		•: ••
CLE V: Other provisions, if any.		
		- 5 - 0
-		
REQUIRED SIGNATURE:		
Z. 0.	en Milkey	
	en measey	·
Signature of a member or a	an authorized representative of a me	mber
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, nent to the Department of State constitutes a things.	I am aware t
Eileen Mulkey		
	oed 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)