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(Re	questor's Name)	
•	,	
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COVER LETTER:

TO:	New Filing S Division of C				
SURI	JECT: Everly P	•			
50.00			sulting Florida Lim	ited Cor	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concernin	g this matter to:		
Mike	Dugas				
Ace F	artnership LLC	(Contact Person)			
•		(Firm/Company)		_	
9415	Whittington Dr				
		(Address)		_	
Jacks	onville FL 32257	•			
		City, State and Zip Code)			
miked	dugas77@gmail.i	com			
E-1	mail Address: (to b	e used for future annual re	port notifications)	_	
For fi	ırther informati	on concerning this ma	tter, please call:		
Mike i	Dugas		_at (⁹⁰⁴	999-	9589
	(Name of Conta	act Person)		e) (Day	rtime Telephone Number)
		or the following amou		process	sed by this office must be payable in US
(\$25 fc & \$12:	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C	ection		New !	t Address: Filing Section ion of Corporations

INHS!1 (7/17)

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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:

Everly Partnership LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of FL
(Enter state, or if a non-U.S. entity, the name of the country)
1/1/2019 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Everly Partnership LLC
(Enter Name of Florida Limited Liability Company) 11/6/2020
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 5th	day of <u>November</u>	20
Signature of Autho	orized Representative of Lim	ited Liability Company:
Signature of Author	rized Representative:	Dur
Printed Name: Mike !	Dugas	Title: owner
Tillited (valifie:	20940	
Signature(s) on beh	nalf of Other Business Entity:	[See below for required signature(s)]
	Mh Dayd	
~,6		Title: Dir
Signature:		
Printed Name: Alex S	Shumate	Title: Dir
21		
Signature:		
Printed Name:	-	Title:
Signatura		
Orginature Printed Name:		Title:
rimica riame	-	
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
ieri	4. 1.	
If Florida Corporat	non: an, Vice Chairman, Director, or	Officer
	ers have not been selected, an In	
is it could be office	ors have not been screeted, an in	corporator must sign.
If Florida General	Partnership or Limited Liabili	ty Partnership:
Si;mature of one Ger		
	Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> (General Partners.	
All othores		
All others: Signature of an auth	orized person	
orginature of an author	orized person.	
Fees:		
Articles of (Conversion:	\$25.00
	rida Articles of Organization:	\$125.00
Certified Co	· ·	\$30.00 (Optional)
Certificate of	• •	\$5.00 (Optional)
		N 1 /

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Everly Partnership LLC	
(Must contain the words "Limited Liab	oility Company, "L.L,C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3491 Pall Mall Dr Suite 118	3491 Pall Mall Dr Suite 118
Jacksonville FL 32257	Jacksonville FL 32257
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
Ace Partnership LLC	
Na	ame
3491 Pall Mall Dr Suite 118	3
Florida street address (P	P.O. Box NOT acceptable)
Jacksonville	FL ³²²⁵⁷
City	Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S
Mik Day	y of
Registered Agent's S	ignature (REQUIRED)
(CONT	INUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Mike Dugas
	9415 Whittington Dr
	Jacksonville FL 32257
AMBR	Alex Shumate
	12101 Uleta Lane
	Orlando FL 34827
	
	
	
(Use attachment if necessary)	
(Use attachment if necessary)	
•	
(Use attachment if necessary) LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	Duga
REQUIRED SIGNATURE: Signature of a member or a	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lam aware to
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, Lam aware to
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S.	
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. Mike Dugas	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, Lam aware to

Dec 10, 45564 44 4800-1404 4-0-0547005 4-08



▼HELLOSIGN

Audit Trail

TITLE		conversion document		
SP.E NAME		Conversion Form.pdf		
DOCUMENT ID		45bfb414ff39d10b1c3a0517085e16ffaec2d8a6		
AUDIT TRAIL DATE FORMAT		MM / DD / YYYY		
STATUS		Completed		
Document	History			
(c)	11 / 05 / 2020	Sent for signature to Mike Dugge (mikedugge 77@gmail.gom) and		
SENT	16:47:06 UTC	Sent for signature to Mike Dugas (mikedugas77@gmail.com) and Alex Shumate (spiritgun87@gmail.com) from		
52.41		mikedugas77@gmail.com		
		IP: 73.35.116.59		
©	11 / 05 / 2020	Viewed by Alex Shumate (spiritgun87@gmail.com)		
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(a)	11 / 05 / 2020	Viewed by Mike Dugas (mikedugas77@gmail.com)		
VIEWED	17:37:50 UTC	IP: 73.35.116.59		
*	11 / 05 / 2020	Signed by Mike Dugas (mikedugas77@gmail.com)		
SIGNED	17:39:08 UTC	IP: 73.35.116.59		
\odot	11 / 05 / 2020	The document has been completed.		
-	17:30-09 LITC	·		

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