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(13	equestor's Name)	
۸)	ddress)	
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(Ö	hty/State/Zip/Phone #)	· -
Dicktb	☐ WAIT	MAIL
(3	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of :	Status
Special Instructions to Filing Officer		





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2021 AFR 26 APP 10: 45

50 111.7 50 C. 16.45



April 26, 2021

115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	April 26, 202	<u> </u>	
Name:	ERIC HOOD	<u>)</u>	
Reference	#:1361	743	
Entity Nan	ne: BIG OF	RANGE RENTAL, LLC	
✓ Articles	s of Incorporation/	Authorization to Transact Bu	siness
Amend	ment		
Change	e of Agent		
Reinsta	atement		
✓ Conver	rsion		
Merger			
☐ Dissolu	ıtion/Withdrawal		
☐ Fictitou	s Name		
✓ Other _	w	CERTIFIED COPY	,
Authorized	d Amount:	\$180.00	
Signature:	Tric 9	Hood	

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.

. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Big Orange Rental, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation P17000 48623 (Enter entity type. Example: corporation, limited partnership,
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
June 2, 2017 (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Big Orange Rental, LLC
(Enter Name of Florida Limited Liability Company)
If not effective on the date of filing, enter the effective date: The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the late this document is filed by the Florida Department of State; AND 2) must be the same as the effective late listed in the attached Articles of Organization, if an effective date is listed therein.)
The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Page 1 of 2

Signe	d this <u>25th</u>	day of <u>April</u>	20 <u>21</u>
Signa	ture of Autho	rized Representative of	Limited Liability Company:
	DocuSigned by:		
		zed Representative:	
Printe	d Name: <u>Jasor</u>	Todd Bachman—ADAGED	scrsssuccTitle: Manager
Signat	ture(s) on beha	alf of Other Business Ent	tity: [See below for required signature(s).]
Signat	ure:		
Printed	Names dason	Todd Bachman	Title: President
Signat	ure:	 <u></u> -	
Printed	d Name:		Title:
Signat	ure:		Tide.
rinte	ı Name:		Title:
Signat	ure.		
Printed	l Name:		Title:
		<u> </u>	Title.
Signati	ure:		
Printed	l Name:	<u></u>	Title:
Signati	ure:		
Printed	l Name:		Title:
16 51			
	ida Corporatio		0.07
Signan	are of Chairmar	ı, Vice Chairman, Directo	r, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.			
If Flor Signatu	ida General Pa	artnership or Limited Li ral Partner.	ability Partnership:
~			
<u>If</u> Flor	<u>ida Limited Pa</u>	rtnership or Limited Li	ability Limited Partnership:
Signati	ires of <u>ALL</u> Ge	neral Partners.	
All oth			
Signatu	ire of an author	ized person.	
<u>Fees:</u>			
	Amiolos sec-	nuorai o	#25.00
	Articles of Co		\$25.00
		la Articles of Organization	
	Certified Copy		\$30.00 (Optional)
	Certificate of	Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Big Orange Re		.iability Company, "L.L.C.," or "LLC.")		
· ·	must end with the words. Entitled I	naonty company, C.E.C., or EEC.)		
ARTICLE II - A The mailing addr		ne principal office of the Limited	Liability Com	pany is:
Principal Office	Address:	Mailing Address:		
357 Pike Rd		346 Pike Rd., Ste. #7		
West Palm Beach, FL 33411		West Palm Beach, FL 33411		
The name and the	e Florida street address of t	he registered agent are:	:	~2
The name and the	Cogency Global Inc.	me registered agent are.	; !	921 A.N
The name and the	Cogency Global Inc.	ame	; ; ;	9021 ACN 26
The name and the	Cogency Global Inc. N 115 North Calhoun St	ame treet, Suite 4		
The name and the	Cogency Global Inc. N 115 North Calhoun St	ame		
The name and the	Cogency Global Inc. N 115 North Calhoun St	ame treet, Suite 4 P.O. Box <u>NOT</u> acceptable)		021 ACN 26 - AH 10: 45
The name and the	Cogency Global Inc. N 115 North Calhoun St Florida street address (ame treet, Suite 4		

Page 1 of 2

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE 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 MGR	Jason Todd Bachman
	346 Pike Rd., Ste. #7
	West Palm Beach, FL 33411
	Trock and Dodon, I'E DOTT
MGR	Jason A. Watson
	346 Pike Rd., Ste. #7
	West Palm Beach, FL 33411
1405	
MGR	Trish Bachman
	346 Pike Rd., Ste. #7
	West Palm Beach, FL 33411
MGR	Kristin Watson
MOIT	346 Pike Rd., Ste. #7
	West Palm Beach, FL 33411
	1103(1 dilli Bedell, 1 E 33411
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the	date of filing: (OPTIONAL)
(ii an effective date is listed, the date must b	be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
ADTICLE VI. Od.	
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
DocuSigned by:	
Signature of a member	or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jason Todd Bachman, Manager

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)