

L21000233483

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200363597582

04/13/21--01021--023 **150.00

2021 APR 13 PM 1:29

FILED



8551 W. Sunrise Blvd., Ste 300
Plantation, FL 33322

3511 W. Commercial Blvd., Ste 304
Fort Lauderdale, FL 33309

TEL : 954.315.1155
FAX : 954.452.3311

April 2, 2021

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear representative,

Please find enclosed articles of conversion for Grant & Associates, LLC. We have found a Grant & Associates, LLC filing on Sunbiz but that was rejected; however, Sunbiz shows that it is active. We have enclosed copies of the Sunbiz status and the rejection for your ease of reference. We are requesting that the 2014 filing be made inactive and allow our conversion filing to be the sole Grant & Associates, LLC in Florida.

If you are unable to accommodate our request, please advise so that we may choose an alternative name for the LLC conversion.

Thank you kindly for your cooperation and attention to this matter, it is much appreciated.

Best regards,

A handwritten signature in black ink, appearing to read "Tania Bartolini".

Tania Bartolini, Esq.

2021 APR 13 PM 1:29

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Grant & Associates Private Equity Solutions 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:

Tania Bartolini
(Contact Person)
Salas Law Firm, P.A.
(Firm/Company)
3511 W Commercial Blvd., Suite 304
(Address)
Fort Lauderdale, FL 33309
(City, State and Zip Code)
tania@salaslawfirm.com
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Tania Bartolini at (954) 368-4050
(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)

☒ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status ☐ \$180.00 Filing Fees and Certified Copy ☐ \$185.00 Filing Fees, Certified Copy, and Certificate of Status

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

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

2021 APR 13 PM 1:29

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:
Grant & Associates Private Equity Solutions LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited 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 Maryland
(Enter state, or if a non-U.S. entity, the name of the country)

on 5/6/2010
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
Grant & Associates Private Equity Solutions 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 2nd day of April 2021.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]
Printed Name: Jeffrey S. Grant Title: MGR

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: [Signature]
Printed Name: Jeffrey S. Grant Title: MGR

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2011 JUN 13 PM 1:29

ARTICLE I - Name:

The name of the Limited Liability Company is:

Grant & Associates Private Equity Solutions LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4010 S. Ocean Drive

Suite 3509

Hollywood, FL 33019

Mailing Address:

4010 S. Ocean Drive

Suite 3509

Hollywood, FL 33019

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Salas Law Firm P.A.

Name

2601 East Oakland Park Blvd., Suite 406

Florida street address (P.O. Box **NOT** acceptable)

Fort Lauderdale

FL 33306

City

Zip

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)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Jeffrey S. Grant

4010 S. Ocean Drive, Suite 3509

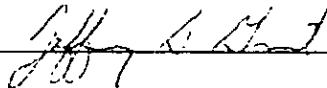
Hollywood, FL 33019

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

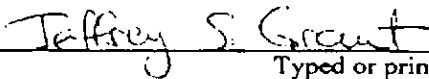
The general purpose for which the Company is organized is to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

REQUIRED SIGNATURE:

_____

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

_____

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)