12/600243/23

(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:

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. COVER LETTER

Division of C				
SUBJECT: Financial	and Accounting Consul	tants, LLC		
30B/LCT	(Name of Res	ulting Florida Limi	ited Con	npany)
				d fees are submitted to convert an "Other ecordance with s. 605,1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
Ken Greenwood				
	(Contact Person)	-	_	
	(Firm/Company)			
8624 Snowy Owl Way			_	
	(Address)			
Tampa, FL 33647			_	
((City, State and Zip Code)		_	
ken.faacinc@gmail.com	m			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
Ken Greenwood		at (<u>813</u>)493-3	3376
(Name of Conta	et Person)	(Area Code) (Day	dime Telephone Number)
	or the following amou a bank located in the		proces	sed 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 and Certified Co	-	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add	ress:			t Address:
New Filing S				Filing Section
Division of C	*			ion of Corporations
P.O. Box 632	1		The C	Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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: Financial and Accounting Consultants, 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.
(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)
(Enter state, or if a non-U.S. entity, the name of the country)
10/25/2000 on
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Financial and Accounting Consultants, 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 thi	s 10 day of April	20 <u>21</u>
<u>Signature</u>	e of Authorized Representative of	f Limited Liability Company:
Signature Printed Na	of Authorized Representative: imc:Kenneth Greenwood	Title: Mgr Member
<u>Signature</u>	(s) on behalf of Other Business)E	ntity: See below for required signature(s)
Signature: Printed Na	amc: Kenneth Greenwood	Title: Pres.
Signature: Printed Na	me:	Title:
Signature: Printed Na	ıme:	Title:
Signature:		Title:
		Title:
Signature:		Title:
If Florida Signature	Corporation: of Chairman, Vice Chairman, Directs or Officers have not been selected	etor, or Officer.
<u>If Florida</u>	General Partnership or Limited of one General Partner.	
	Limited Partnership or Limited of ALL General Partners.	Liability Limited Partnership:
Ail others Signature	s: of an authorized person.	
Fees:		
Fe Ce	rticles of Conversion: res for Florida Articles of Organiza ertified Copy: ertificate of Status:	\$25.00 ation: \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na		
The name of the L	limited Liability Compar	y is:
	unting Consultants, LLC	iability Company, "L.L.C.," or "LI.C.")
ARTICLE II - A The mailing addre		he principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
8624 Snowy Owl W	/ay	8624 Snowy Owl Way
Tampa, FL 33647		Tampa, FL 33647
(The Limited Liability C business entity with an	Registered Agent, Regis Company cannot serve as its own active Florida registration.) Florida street address of Kenneth Greenwood	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
		Name
	8624 Snowy Owl Way	
		(P.O. Box NOT acceptable)
	Tampa	FL 33647
	City	Zip
liability com registered agent statutes relativ	pany at the place designal tand agree to act in this cange to the proper and completing to the properties.	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as expacity. I further agree to comply with the provisions of a plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
IMICIK = Manager	
MGR	Kenneth Greenwood
WGK	8624 Snowy Owl Way
	Tampa, FL 33647
	
Use attachment if necessary)	
LE V: Other provisions, if any.	
/	
)
REQUIRED SIGNATURE: /	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member or an	authorized representative of a member
Signature of a member or an This document is executed in accordance wi	th section 605.0203 (1) (b), Florida Statutes. I am awa
Signature of a member or an This document is executed in accordance wi	authorized representative of a member (ith section 605.0203 (1) (b), Florida Statutes. I am awa (it to the Department of State constitutes a third degree

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)