La1600 503783

(Requestor's Name) (Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
(Comment and	
Cartified Conice Cartificates of Chalus	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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COVER LETTER

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TO: New Filing S Division of C							
SUBJECT: Elliott's E	Elite Home Solutions, LL	С					
	(Name of Res	ulting Florida L	imited Cor	npany)	_		
				nd fees are submitted to ecordance with s. 605.1			her
Please return all corr	espondence concerning	g this matter t	to:				
Melissa Quinlan					•	28	
	(Contact Person)				~ . ►	21 J	
Elliott's Elite Home So	lutions, LLC				.	2021 JUR 29	
	(Firm/Company)				<u> </u>	62	
7386 Deer Crossing C	ourt					<u> </u>	1-4
	(Address)					ö	
Sarasota, FL 34240						<u>;</u> -	
	City, State and Zip Code)						
melissa@elliotthomese	olutions.com						
E-mail Address: (to b	be used for future annual re	port notification	ıs)				
For further informati	on concerning this ma	tter, please ca	ıll:				
Melissa Quinlan		_at (<u>941</u>)_809-		_		
(Name of Conta	act Person)	(Area Co	ode) (Day	ytime Telephone Number)			
	for the following amou a a bank located in the	-	-	sed by this office must	be paya	ble in U	JS
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Fi and Certified		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Add	ress:		Stree	et Address:			

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

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

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.

Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Elliott Home Solutions, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, infitted partitership, general partitership, common law or ousness 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)
on 01/22/2020 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Elliott's Elite Home 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 22nd day of June	20 21 .
Signature of Authorized Representa	tive of Limited Liability Company:
Signature of Authorized Representativ	e:
Printed Name: D. Ryan Elliott	Title: President
	ess Entity: [See below for required signature(s)]
Signature:	
Printed Name: D. Ryan Elliott	Title: President
Signature:	
Printed Name: Melissa Quinlan	Title: Secretary
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
	
If Florida Corporation:	
Signature of Chairman, Vice Chairman,	
If Directors or Officers have not been se	elected, an Incorporator must sign.
lf Florida General Partnership or Lir	nited Liability Partnership:
Signature of one General Partner.	

If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of <u>ALL</u> General Partners.

\$25.00

Articles of Conversion: Fees for Florida Articles of Organization:

All others: Signature of an authorized person.

Fees:

\$125.00

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RTICLES OF C	RGANIZATION FOR	FLORIDA L	IMITED LIABI	LITY COMPANY
ARTICLE I - Nat	me:			
The name of the L	imited Liability Company	is:		
	Caladiana III C			
Elliott's Elite Home : (M	ust contain the words "Limited Lia	bility Company, "I	L.C.," or "LLC.")	
	1.3			
ARTICLE II - Ac The mailing addre	icress: ss and street address of the	principal offi	ce of the Limited	Liability Company is:
		• ,		, , ,
Principal Office A	<u> Address:</u>	Maning	Address:	
49854 Ringling		P.O. Box		
Sarasota, FL 34	230	Sarasota	FL 34230	
	Florida street address of the David Ryan Elliott			
	Na	ame		
	49854 Ringling Blvd.			
	Florida street address (I	P.O. Box <u>NO1</u>	acceptable)	
	Sarasota	FL	34230	
	City		Zip	
liability comp registered agent statutes relatin	med as registered agent an pany at the place designate and agree to act in this cap g to the proper and comple pligations of my position as	d in this certifi pacity. I furthe ete performanc registered age	cate, I hereby accor or agree to comply e of my duties, and	ept the appointment as with the provisions of all I I am familiar with and
		. 1		ě sa
	Registered Agent's S	Signature (REG	QUIRED)	202

(CONTINUED)

.

as provided for in s.817.155, F.S.

David Ryan Elliott

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	9 119 mm n			
MGR	David Ryan Elliott			
	49854 Ringling Blvd.			
	Sarasota, FL 34230			
AMBR	Melissa Quinlan			
	7386 Deer Crossing Court			
	Sarasota, FL 34240			
	Sarasota, F. D. 772-10			
(Has standen and S				
(Use attachment if necessary)				
CLE V: Other provisions, if any.	-1			
obb i. Other provisions, it may.	· · · · · · · · · · · · · · · · · · ·			
-				
REQUIRED SIGNATURE:				

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)

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