# L21000345122

(Re	equestor's Name)	
(Ad	ldress)	
——————————————————————————————————————	Idress)	
( ,-	2.000,	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(50	omood Emily Man	10)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
opeoid/ instructions to	Timing Critical	
	_	

Office Use Only



500368875575

07/30/21--01002-+024 \*\*180.00

2021 JUL 29 MH II 31 20 SECNAL LATATE OF

2021 JUL 29 PM 5: 00

RECEIVED



12905 SW 42 STREET Suite: 210 MIAMI, FL 33175 Phone: 305-444-4994

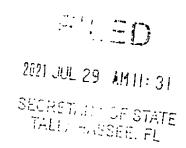
Phone: 305-444-4994 Email: filing@ecfsfiling.com

DIVISION OF CON TALLAHASSER	2021 JUL 29	RECEI
2007 FCF	R	ΨE
RATIO RATIO	<u>ઃ</u> 58	Ö
Office Use Sinly	58	

### CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

	. ,	
1. <u>Dependa 6.</u> (CORPORATE NAME)	le Packaging and	SOLUTIONS; INC.
2. (CORPORATE NAME)	(D	P06000150410 ocument#)
3. (CORPORATE NAME)	(D	OCUMENT#)
	k up time: TCertified Copy	Certificate Of Status
☐ Walk-In X Pic	k up time: Amendments	Certificate Of Status  Other Filings
New Filings	Amendments	Other Filings
New Filings Profit	Amendments Amendments	Other Filings Annual Report
New Filings Profit Non-Profit	Amendments Amendments Resignation	Other Filings  Annual Report  Fictitious Name

**Examiners Initials** 



## 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:  Dependable Packaging and Solutions, Inc.
(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
12/5/2006
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Dependable Packaging and 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	3 29th	day of July		_ 20_ 21
Signature	of Authori	zed Representative (	of Limi	ted Liability Company:
<b>a</b> .	A	10		Pul L
Signature of	of Authorize	ed Representative:		Title: Manager
Printed Nat	me: Daniel Fi	errocci		Title. Wallager
Signature(	s) on behali	of Other Business E	ntiPe:us[	Set below for required signature(s)]
			121	<u>L</u>
Signature:	D:-ID	<u> </u>	725:253	Title: President
Printed Nar	ne: Daniei Pe	etrucci		Title: Fresident
Signature:				
Printed Nar	ne:			Title:
Signature:				maint .
Printed Nan	ne:		<del></del>	Title:
Signature:				
Printed Nan	ne:			Title:
Printed Nan	ne:			Title:
Signature:				
Printed Nan				Title:
		,	·	
	Corporation		_	
Signature of	f Chairman,	Vice Chairman, Direct	tor, or C	Jfficer.
II Directors	or Officers	have not been selected	i, an inc	orporator must sign.
If Florida (	General Par	tnership or Limited I	Liabilit	v Partnership:
	fone Genera			
			Liability	Limited Partnership:
Signatures of	of ALL Gen	eral Partners.		
All others:				
Signature of	an authoriz	ed person.		
Fees:				
Δrti	cles of Con	version:		\$25.00
		Articles of Organizat	tion.	\$125.00
	ified Copy:	•		\$30.00 (Optional)
	ificate of St			\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ckaging and Solutions, LLC		
	(Must contain the words "Limited Li-	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing ad	- Address: dress and street address of th	e principal office of the Limited Liab	ility Company is:
Principal Offi	ce Address:	Mailing Address:	
700 Baldwin Pal	lm Avenue	700 Baldwin Palm Avenue	
Plantation, FL 3	<del></del>	Plantation, FL 33324	<del></del>
(The Limited Liabil	- Registered Agent, Registerity Company cannot serve as its own Financial active Florida registration.)	ered Office, & Registered Agent's S Registered Agent. You must designate an individu	at of stronger
(The Limited Liabil business entity wit	ity Company cannot serve as its own b	Registered Agent. You must designate an individua	at of stronger
(The Limited Liabil business entity wit	ity Company cannot serve as its own be an active Florida registration.)  the Florida street address of 1  Daniel Petrucci	Registered Agent. You must designate an individua	2021 JUL 29 SECRETARY
(The Limited Liabil business entity wit	ity Company cannot serve as its own be an active Florida registration.)  the Florida street address of 1  Daniel Petrucci	he registered agent are:	2021 JUL 29 SECRETARY
(The Limited Liabil business entity wit	ity Company cannot serve as its own in high an active Florida registration.)  the Florida street address of the Daniel Petrucci  No Baldwin Palm Avenue	he registered agent are:  fame P.O. Box NOT acceptable)	2021 JUL 29 SECRETARY
(The Limited Liabil business entity wit	ity Company cannot serve as its own in high an active Florida registration.)  the Florida street address of the Daniel Petrucci  No Baldwin Palm Avenue	the registered agent are:	2021 JUL 29 SECRETARY

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR — Mallagei	Daniel Petrucci	
	700 Baldwin Palm Avenue	
	Plantation, FL 33324	
(Use attachment if necessary)		
LE V: Other provisions, if any.		
<u>REQUIRED</u> SIGNATURE:		
This document is executed in accordance any false information submitted in a docu	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo-docustioned by:	at iny
as provided for in s.817.155, F.S.	2//	
	Wi Daniel Petrucci	

2021 JUL 29 AMII: 31