(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

RUS 0 4 2021

T. SCOTT



900370838489

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Path Forward Consulting Li	LC	
	of Resulting Florida Lim	ited Company)
		ion, and fees are submitted to convert an "Other y" in accordance with s. 605.1045, F.S.
Please return all correspondence conce	erning this matter to:	
Allison V. Manswell		
(Contact Person)		_
Path Forward Consulting LLC		
(Firm/Company)		_
6038 NW 116th Drive		
(Address)		_
Coral Springs FL 33076		
(City, State and Zip C	ode)	-
allison@pathforward2impact.com		
E-mail Address: (to be used for future ann	ual report notifications)	_
For further information concerning thi	s matter, please call:	
Allison V. Manswell	at (956-6246
(Name of Contact Person)	(Area Code	(Daytime Telephone Number)
Enclosed is a check for the following a dollars and drawn on a bank located in	•	processed 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	Fees	
Mailing Address: New Filing Section Division of Corporations		Street Address: New Filing Section Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Conversion

or

"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: Path Forward Consulting 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
(Enter state, or if a non-U.S. entity, the name of the country)
January 12, 2018 on .
on January 12, 2018 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Path Forward Consulting LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: N/A
(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.)
<u>Note:</u> 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 23 day of July	20 <u>21 </u>
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Allise	
Signature of Authorized Representative: XYELLAG	m municipal provides of
Printed Name: Allison V. Manswell	Title: Chief Hesuits Officer
Signature(s) on behalf of Other Business Entity:	
Signature: Allison Wanswell Printed Name: Allison V. Manswell	Kanowell
Printed Name: Allison V. Manswell	Title: Chief Results Offcer
6:	
Signature:	rov. 1
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Times (valie)	
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In-	
if threetors of Officers have not been selected, an in-	corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u>	ty Partnership:
Signature of one General Partner.	
If Florida I imited Doutnambia on I imited I inhili	m. I imitad Dautaanahin.
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
organitates of <u>reads</u> desictat tatalors.	
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

	Limited Liability Company is	s:
Path Forward Co		
£)	lust contain the words "Limited Liabit	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - A The mailing addre		orincipal office of the Limited Liability Company i
Principal Office	Address:	Mailing Address:
	Drive Coral Springs	6038 NW 116th Drive Coral Springs
FL 33076		FL 33076
	Company cannot serve as its own regi	stered Agent. You must designate an individual or another
business entity with ar	o active Florida registration.) Florida street address of the	stered Agent. You must designate an individual or another registered agent are:
business entity with ar	n active Florida registration.) Florida street address of the Allison V. M	registered agent are:
business entity with ar	n active Florida registration.) Florida street address of the	registered agent are:
business entity with ar	n active Florida registration.) Florida street address of the Allison V. M	registered agent are: lanswell ne
business entity with ar	n active Florida registration.) Florida street address of the Allison V. M Nan	registered agent are: lanswell ne h Drive FL
business entity with ar	n active Florida registration.) Florida street address of the Allison V. M Nam 6038 NW 116tl	registered agent are: lanswell ne h Drive FL D. Box NOT acceptable)
business entity with ar	Allison V. M Nam 6038 NW 116tl Florida street address (P.0	registered agent are: lanswell ne h Drive FL D. Box NOT acceptable)

ted 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)



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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address: Allison V. Manswell
"MGR" = Manager	6038 NW 116th Drive Coral Springs FL 33076
	
(Use attachment if necessary)	
OLD M. O.A	
CLE V: Other provisions, if any.	

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)