# 171000355959

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(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



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#### **COVER LETTER**

HQ:	Division of C			
CHIDI	ECT:	OPTIONSIZZL	E.COM LLC	
SUDA	ECT:	(Name of Res	sulting Florida Limited	(Company)
				n, and fees are submitted to convert an "Other in accordance with s. 605,1045, F.S.
Please	return all corre	espondence concerning	g this matter to:	
	Joshua M. Be	elanger		
		(Contact Person)	_	
	OPTIONSIZ	ZLE.COM LLC		
		(Firm/Company)		
	55 SE 2nd A	ve STE 205		
	<u> </u>	(Address)		
	Dolray Road	n. FL 33444-3615		
	<del></del>	Lity, State and Zip Code)		
	jmbelanger(a	·		
E-n		e used for future annual re	port notifications)	
For fu	rther informati	on concerning this ma	tter, please call:	
R	obert J. Hickol	k, Esq.	_at (561)_	819-6219
	(Name of Conta		(Area Code)	(Daytime Telephone Number)
		or the following amou a bank located in the	-	deessed by this office must be payable in US
(\$25 fo) & \$125	0.00 Filing Fees Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fo and Certified Copy	bes ■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add			treet Address:
	New Filing S			ew Filing Section
	Division of C	•		ivision of Corporations he Centre of Tallahassee
	P.O. Box 632 Tallahassee, I			415 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

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles OPTIONSIZZLE.COM LLC	, we conversion to
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is aLimited 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 The U.S. State of Illinois	
(finter state, or if a non-U.S. entity, the n	ame of the country)
on March 11, 2020	
rdate of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articl	les of Organization:
OPTIONSIZZLE.COM 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 lieted at the
document's effective date on the Department of State's records.	an in the or nated to the
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 appraisa which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.	I rights the amount to
	202
	2021 71 3
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Signed this day of	20_21
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: / / // Printed Name: Joshua M. Belanger	n 14 Belangue Title: Managing Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: John M. Belanger  Printed Name: Joshua M. Belanger	Title: Managing Member
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
<u>If Florida Corporation:</u>	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or 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.	
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
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)

#### ARTICLE IV-

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

$-0.8 \times 1000 = 0.00$ in the state of $M_{\odot}$ and $M_{\odot}$	
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Joshua M. Belanger
ANDK	55 SE 2nd Ave STE 205
	Delray Beach, FL 33444-3615
	Delta Found 2 35 (1) 5035
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
	70.3
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	0
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	Belayer
REQUIRED SIGNATURE:	$\mathcal{O}$
REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member ewith section 605,0203 (1) (b), Fiorida Statutes, I am aware
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu	an authorized representative of a member e with section 605,0203 (1) (b), Florida Statutes, I am aware ament to the Department of State constitutes a third degree to
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes, I am aware ament to the Department of State constitutes a third degree to the Department of State constitutes as the constitutes as t
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu	e with section 605.0203 (1) (b), Florida Statutes, I am aware ament to the Department of State constitutes a third degree \(\varphi\)
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes, I am aware ament to the Department of State constitutes a third degree to the Department of State constitutes as the constitutes as t

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ONSIZZLE.COM LLC		
(M)	ast contain the words "Limited Liab	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ac	ldress:		
The mailing addre	ss and street address of the	principal office of the Limited Liability Com	pany is
Principal Office /	Address:	Mailing Address:	
Joshua M. Belan	ger	Joshua M. Belanger	
55 SE 2nd Ave S	STE 205	55 SE 2nd Ave STE 205	
Delray Beach, F  ARTICLE III - R  The Limited Liability C business entity with an	L 33444-3615 Tegistered Agent, Register	Defray Beach, FL 33444-3615  ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another	:
Delray Beach, F  ARTICLE III - R  The Limited Liability C  business entity with an	L 33444-3615  Legistered Agent, Register ompany cannot serve as its own Registration.)	Delray Beach, FL 33444-3615  ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:	:
Delray Beach, F  ARTICLE III - R  The Limited Liability C  business entity with an	L 33444-3615  Legistered Agent, Register ompany cannot serve as its own Registive Florida registration.)  Florida street address of the	Defray Beach, FL 33444-3615  ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:	:
Delray Beach, F  ARTICLE III - R  (The Limited Liability C business entity with an	L 33444-3615  Legistered Agent, Register ompany cannot serve as its own Reserve Florida registration.)  Florida street address of the Joshua M. Belange	Delray Beach, FL 33444-3615  ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:	
Delray Beach, F  ARTICLE III - R  (The Limited Liability C business entity with an	L 33444-3615  Legistered Agent, Register ompany cannot serve as its own Reserve Florida registration.)  Florida street address of the Joshua M. Belange Na  55 SE 2nd Ave ST	Delray Beach, FL 33444-3615  ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:	
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Delray Beach, F  ARTICLE III - R  The Limited Liability C business entity with an	L 33444-3615  Registered Agent, Register ompany cannot serve as its own Registration.)  Florida street address of the Joshua M. Belange Na 55 SE 2nd Ave ST Florida street address (P	Delray Beach, FL 33444-3615  ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:  r ne  E 205  O. Box NOT acceptable)	

(CONTINUED)