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(Requestor's Name)	
(Address)	
	Address)	
(City/State/Zip/Phone #)	
		MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies	Certificates of S	tatus
Special Instructions	to Filing Officer:	
	Office Use Only	
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AUG 2 3 2021

COVER LETTER

TO: New Filing Section Division of Corporations

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SUBJECT: Elevation Movement, LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Hallie Bulkin

(Contact Person)

Elevation Movement, LLC

(Firm/Company)

2852 Banyan Boulevard Circle NW

(Address)

Boca Raton, FL 33431

(City, State and Zip Code)

hallie@littlesproutspeech.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Hallie Bulkin	at (³⁰¹	943-0920
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

🔳 \$150.00 Filing Fees	□\$155.00 Filing Fees	\$180.00 Filing Fees	□\$185.00 Filing Fees,
(\$25 for Conversion	and Certificate of	and Certified Copy	Certified Copy, and
& \$125 for Articles	Status		Certificate of Status
of Organization)			

Mailing Address:

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

Street Address:

New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 <u>Articles of Conversion</u> For

21 60520 Pri 1:25

For <u>"Other Business Entity"</u> 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 of Conversion is: Elevation Movement, LLC

(Enter Name of Other Business Entity)
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)

March 10, 2021

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Elevation Movement, 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 Duries of Easter" have a state of the state

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Elevation Movement, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Dringing Office Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Thicipal Office Address:	
2852 Banyan Boulevard Circle NW	285
Boca Raton, FL 33431	Boo

Mailing Address:

2852 Banyan Boulevard Circle NW Boca Raton, FL 33431

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Marc Freedman	
N	Vame
2852 Banyan Boulevard	Circle NW
Florida street address	(P.O. Box <u>NOT</u> acceptable)
Boca Raton	FL ³³⁴³¹
City	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of 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)