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(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:					

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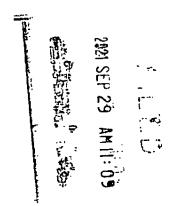
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COVER LETTER

TO:	New Filing S Division of C					
SHR	JECT:	EI	EVER S	SEARCH	LLC	
150131	7	(Name of Res	alting F	lorida Lin	iited Con	npany)
						d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g this n	natter to	:	
	E	BRUCE B HUBBARD				
		(Contact Person)			_	
	HUBCO I	NCORPORATION SERV	ICES			
		(Firm/Company)			_	
	238 W	EST JERICHO ŢŪRNPIK	E			
		(Address)		•		
	HUNTIN	GTON STATION, NY 11	746			
	((City. State and Zip Code)			_	
	ABI	ANCHI@thaneyepa.com				
15-r	nail Address: (to b	e used for future annual re	port noti	fications)	_	
For fi	irther information	on concerning this ma	tter, ple	ase call:		
	EX	MILY	_at (516)	813-1189
	(Name of Conta	ct Person)		Area Code	e) (Day	time Telephone Number)
		or the following amou a bank located in the			process	sed by this office must be payable in US
(\$25 fo & \$125	60.00 Filing Fees or Conversion 5 for Articles anization)	■\$155.00 Filing Fees and Certificate of Status		0.00 Filin ertified Co	_	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				New I Divisi P. O. I	Filing So on of C Box 631	orporations

Articles of Conversion

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 a 605 1045. Florida Limited Liability Company in accordance with a 605 1045. Florida Limited Liability Company in accordance with a 605 1045. Florida Limited Liability Company in accordance with a 605 1045. "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" immediatel ELEVER SEARCH LLC	y prior to the filing of the Articles of Conversion is:
(Enter Name of Other Busine	ss Entity)
2. The "Other Business Entity" is a	LIMITED LIABILITY COMPANY
(Enter entity type. Example: corporation, limited pa	artnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of	f
(Enter state, or if a non-U.S. entity, the name of the country)
on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company a ELEVER SEARCH LLC	as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liabil	ity Company)
4. If not effective on the date of filing, enter the effective	e date:
(The effective date: Cannot be prior to date of receipt the date this document is filed by the Florida Departs Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	t or filed date nor more than 90 calendar days after ment of State.)
5. The plan of conversion has been approved in accordar	nce with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to which such members are entitled under ss. 605,1006 and	pay any members having appraisal rights the amount to 1605.1061-605.1072, F.S.

Signed this _	3RD	_day of	SEPTEMBER	20	21 .	
Signature of Authorized Representative of Limited Liability Company:						
Signature of Authorized Representative: Kathay Komanicki Printed Name: Kathryn Komanicki Title: MEMBER						<u>MAN</u> UCKI MEMBER
Signature(s) o	Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]					
Signature: Printed Name:	Kat	Kathryn K	SOMARNICK i Iomarnicki	Title: _	AUTH	ORIZED PERSON
Signature: Printed Name:				Title: _		
Signature: Printed Name:	<u></u>			Title: _		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.						
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.						
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.						

All others: Signature of an authorized person.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Con	npany is:	2021 SEP 29
ELEVI	ER SEARCH LLC	ءِ الْجَيَّا
(Must contain the words "Lim	ited Liability Company, "L.L.C.," or "L.LC,")	
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited	
Principal Office Address:	Mailing Address:	
2932 Sandpiper Place	2932 Sandpiper Place	
Clearwater, FL 33762	Clearwater, FL 33762	
ARTICLE III - Registered Agent, Ro (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street addres	own Registered Agent. You must designate an ind	

Kathryn Komarnicki				
Nan	ne			
2932 Sandpiper Place				
Florida street address (P.	O. Box <u>NO</u>	Γ acceptable)		
Clearwater	FL.	33762		
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..

Katheyn Komunicki
Registered Agent's Signature (REQUIRED)

Kathryn Komarnicki (CONTINUED)

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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 AMBR	Mark and Mr. Co. 1971		
AWIBR	Kathryn Komarnicki		
	2932 Sandpiper Place		
	Clearwater, FL 33762		
			
			
(Use attachment if necessary)			
(Ose attachment if necessary)			
CLE V: Other provisions, if any.			
obit vi odici provisionat ir any.			
	<u> </u>		
REQUIRED SIGNATURE:			
	. /		
Kathen	n Komarricki		
Signature of a member or a This document is executed in accordance any false information submitted in a docum	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felony		
as provided for in s.817.155, F.S.			
К	lathryn Komarnicki		
	ped or printed name of signee		
- •	1		