L21000431686

(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:

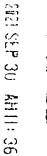
Office Use Only



300374008163

09,780,721--01021--029 **199,00

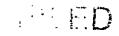
SECRETARY OF STATE





COVER LETTER

TO:	New Filing S Division of C				
CHID	JECT: Keyston	•			
SUB	JECT:		sulting Florida Lir	nited Cor	mpany)
					nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concernin	g this matter to	:	
Kimb	erly Lynch				
		(Contact Person)			
		(Firm/Company)			
1775	US Highway 1 So			_	
Ct Ai	ugustine, FL 3208	(Address)			
- AL	<u> </u>	City, State and Zip Code)			
kevst	رب onevt@gmail.con	-			
		e used for future annual re	port notifications)	_	
		on concerning this ma			
Kimbe	erly Lynch		_at (չ 878-	5155
	(Name of Conta	ct Person)	(Area Coc	le) (Da	ytime Telephone Number)
		or the following amou a bank located in the		proces	sed by this office must be payable in US
(\$25 fc & \$12:	50.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified C	-	S185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Adda New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303



Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

2821 SEP 3U AH 11: 36 SECRETARY OF STATE TALLED ASSEE, FL

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: Keystone Consulting LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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 1, 2019
January 1, 2019 on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Keystone Architects 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 27	day of September	20 <u>21</u> .
•	orized Representative of Li	
Signature of Author	rized Representative: KX	gro-
Printed Name: KIMB	rized Representative: XX ERLY LYNCH	Title: OWNER
Signature(s) on bel	nalf of Other Business Entity	[See below for required signature(s)]
Signature: KK	nich	Title: OWNER
Printed Name: KIMB	ERLY LYNCH	Title: OWNER
Printed Name:		Title:
Signature:		· · · · · · · · · · · · · · · · · · ·
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
If Florida Corporat		
	an, Vice Chairman, Director, c	
If Directors or Office	ers have not been selected, an l	ncorporator must sign.
If Florida General 1	Partnership or Limited Liabi	lity Partnershin:
Signature of one Ger		
II Florida Limited I	Partnership or Limited Liabi	lity Limited Partnership:
Signatures of <u>ALL</u> (Jeneral Pariners.	
All others:		
Signature of an author	orized person.	
Fees:		
Articles of C	Conversion:	\$25.00
· =	rida Articles of Organization:	
	_	
Certified Co Certificate o		\$30.00 (Optional)
Certificate o	i diatus.	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Co	ilpany is.	
Keystone Architects LLC		
(Must contain the words "L	ited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street addre	of the principal office of the Limited Liability Company	y is:
Principal Office Address:	Mailing Address:	
1775 US Highway 1 South #1005	1775 US Highway 1 South #1005	
St. Augustine, FL 32084	St. Augustine, FL 32084	
St. Augustine, FL 32084 ARTICLE III - Registered Agent,	St. Augustine, FL 32084 egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another	, 9
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration	St. Augustine, FL 32084 egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another	2021 SE
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration	St. Augustine, FL 32084 egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:	9021 SEP 3
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registratio). The name and the Florida street addr.	St. Augustine, FL 32084 egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:	2021 SEP 3Ú -
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration) The name and the Florida street addr	St. Augustine, FL 32084 egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:	
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registratio) The name and the Florida street addr Kimberly Lynch	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:	歌 三 い
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration.) The name and the Florida street address Kimberly Lynch.	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:	

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)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager				
AMBR	Kimberly Lynch			
	1775 US Highway 1 South #1005			
	St. Augustine, FL 32084	•		
		•		
				
		•		
	·	-		
				
		-		
	<u> </u>	9 res		
		5 2		
	<u> </u>			
(Use attachment if necessary)		- T.		
		့် မှု		
		<u> </u>		
ARTICLE V: Other provisions, if any.	<u>m</u> :			
•	Ĭμ ^c	n =		
		μ ω		
		# 0 ^		
				
DECLUBED CLCMATURE.				
REQUIRED SIGNATURE:				
0.0 1				
Repreh				
•				
Signature of a member or a	in authorized representative of a member			
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware t	hat		
any false information submitted in a docum as provided for in s.817.155, F.S.	nent to the Department of State constitutes a third degree fel-	ony		
as provided for in s.817.155, r.5.				
KIMBERLY LYNCH				
	ped or printed name of signee	•		
*JF	or printed name or signed			

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)

STATE OF VERMONT OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

KEYSTONE CONSULTING LLC

a Domestic Limited Liability Company formed under the laws of the State of VERMONT, was filed for record in this office on Jan 01, 2019.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution / withdrawal have not been filed.

September 27, 2021

Given under my hand and seal of office, at Montpelier, the State Capital.

James C. Charles

James C. Condos Vermont Secretary of State

TREEDOM LANGE RM ON

Business ID: 0351097 Certificate Number: 2013874942001