L21000439509

(Requestor's Name)
(Address)
, ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SECNETARY OF STATE

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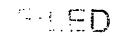
COVER LETTER

TO:	New Filing So Division of C				
ermi		CH ANALYTICS CONS	ULTING, LLC		
SUBJ	IECI:	(Name of Res	ulting Florida Limit	ed Con	npany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concerning	g this matter to:		
Dr. Ci	ndy M. Walker R	ingel			
		(Contact Person)			
RESE	ARCH ANALYTI	CS CONSULTING, LLC			
		(Firm/Company)		•	
3116	Pellam Blvd				
		(Address)		,	
Port C	Charlotte FL 3394	8			
		City, State and Zip Code)			
dr.cin	dy.m.walker@gm	•			
		e used for future annual re	port notifications)		
		on concerning this ma			
Dr. Ci	indy M. Walker R	ingel	at (414	\218-2	2442
	(Name of Conta	et Person)	(Area Code)	(Day	rtime Telephone Number)
		for the following amou a bank located in the	-	rocess	sed by this office must be payable in US
(\$25 fd & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C	ection orporations		New I Divisi	t Address: Filing Section ion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



Articles of Conversion For "Other Business Entity" Into

SECRETARY OF STATE

2021 OCT -6 AH 10: 42

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.

Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: RESEARCH ANALYTICS 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.)
(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)
July 2, 2020 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
RESEARCH ANALYTICS CONSULTING, 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.

Signed this 29th d	ay of September	20_21
		mited Liability Company:
Signature of Authorized Printed Name; Dr. Cindy N	Representative: Circle M. Walker Ringel	Title: Authorized Member, Manager, CE
Signature(s) on behalf o	f Other Business Entity	: [See below for required signature(s)]
Signatura: Cada	MI I Palker K	Title: Authorized Member, Manager, CE
Printed Name: Dr. Cindy N	1. Walker Ringel	Title: Authorized Member, Manager, CE
Signature:		
Printed Name:		Title:
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
<u> If Florida Corporation:</u>		
Signature of Chairman, V		
If Directors or Officers h	ave not been selected, an	Incorporator must sign.
lf Florida General Part		ility Partnership:
Signature of one General	Partner.	
		ility Limited Partnership:
Signatures of <u>ALL</u> Gene	ral Partners.	
All others: Signature of an authorize	d person.	
Fees:		
Certified Copy:	Articles of Organization	\$30.00 (Optional)
Certificate of Sta	nus:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	YTICS CONSULTING, LLC		
(N	flust contain the words "Limited Li	ability Company, "L.L.C.," or "Ll.C.")	
ARTICLE II - A The mailing addre		e principal office of the Limited Liability Comp	oany is:
Principal Office		Mailing Address:	J
Research Analytics	s Consulting, LLC	Research Analytics Consulting, LLC	
3116 Pellam Blvd		3116 Pellam Blvd	
21101 Chaill Diva		31 to Peliatii biyu	
Port Charlotte FL 3 ARTICLE HI - I (The Limited Liability)	Registered Agent, Regist	Port Charlotte FL 33948 ered Office, & Registered Agent's Signature: tegistered Agent. You must designate an individual or another	
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Regist	Port Charlotte FL 33948 ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	20
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Regist Company cannot serve as its own I n active Florida registration.)	Port Charlotte FL 33948 ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	2021 0
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Regist Company cannot serve as its own In active Florida registration.) Florida street address of Dr. Cindy M. Walker Ring	Port Charlotte FL 33948 ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	2021 OCT -1
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Regist Company cannot serve as its own In active Florida registration.) Florida street address of Dr. Cindy M. Walker Ring	Port Charlotte FL 33948 ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	2021 OUT -6
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Regist Company cannot serve as its own In active Florida registration.) Florida street address of Dr. Cindy M. Walker Ring N 3116 Pellam Blvd	Port Charlotte FL 33948 ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	2021 OUT -6 AMIO
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Regist Company cannot serve as its own In active Florida registration.) Florida street address of Dr. Cindy M. Walker Ring N 3116 Pellam Blvd	Port Charlotte FL 33948 ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	2021 OUT -6 AM 10: 42

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)

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	Dr. Cindy M. Walker Ringel
7 (WILL)	3116 Pellam Blvd
	Port Charlotte FL 33948
MGR	Dr. Cindy M. Walker Ringel
	3116 Pellam Blvd
	Port Charlotte FL 33948
	
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	ام <u></u> -
	(A)
(Use attachment if necessary)	<u></u> 5
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	M Walter Dines
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felo
Dr. Cindy M. Walker Ringel	
Ty	

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)