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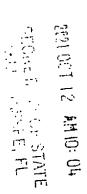
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	<del></del>
PICK-UP WAIT MA	AIL.
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



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#### **COVER LETTER**

TO: New Filing Section Division of Corporation	ns.		
SUBJECT: Crm Voice, LLC			
SUBJECT.	(Name of Resulting Flori	la Limited Company)	
The enclosed Articles of Conve Business Entity" into a "Florida			
Please return all correspondence	e concerning this mat	er to:	
D. Mathew Blackburn			
(Contact	Person)		
The Law Office of D. Mathew Blad	ckburn		
(Firm/Co	mpany)		
9800 Mount Pyramid Ct. Ste. 400			
(Addi	ress)	<del></del>	
Englewood, CO 80112			'
(City, State ar	nd Zip Code)		
mathew@dmblackburn.com	-		
E-mail Address: (to be used for fu	iture annual report notifica	tions)	
For further information concern	ning this matter, please	call:	
D. Mathew Blackburn	at ( <sup>720</sup>	213-6204	
(Name of Contact Person)	(Are	a Code) (Daytime Telepho	one Number)
Enclosed is a check for the follo dollars and drawn on a bank loc			office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)			• •
Mailing Address:		Street Address:	
New Filing Section		New Filing Secti	
Division of Corporation P.O. Box 6327	S	Division of Corp	
L.O. DOX 0047		The Centre of Ta	manassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2021

THE LAW OFFICE OF D. MATHEW BLACKBURN 9800 MOUNT PYRAMID CT. STE. 400 ENGLEWOOD, CO 80112

SUBJECT: CRM VOICE, LLC Ref. Number: W21000128478

We have received your document for CRM VOICE, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

www.sunbiz.org

Letter Number: 721A00023123



#### Articles of Conversion For

## "Other Business Entity" Into

## SPEACTALL OF STATE

#### 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" imMortgagetely prior to the filing of the Articles of Conversion is: Crm Voice, 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)
May 25, 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:
Crm Voice, 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.)
<u>Note:</u> 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 16th day of September	20 <u></u>
Signature of Authorized Representative of Lin	
Signature of Authorized Representative: 12 m	411
Signature of Authorized Representative: 17,700	Til Comercia Coursel
Printed Name: D. Mathew Blackburn	Title: Corporate Counsei
Signature(s) on behalf of Other Business Entity:	
Signature: Natra Zde	
Signature: Natura 2 de Printed Name: Nathan 2 de	_ Title: President
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature	
Signature:Printed Name:	Title:
Timed (diffe:	
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an I	ncorporator must sign.
IS Plant 2. Community at the control of the control	Par Day Art 1
If Florida General Partnership or Limited Liabil Signature of one General Partner.	nty Partnersnip:
Signature of one Ocheral Faturer.	
If Florida Limited Partnership or Limited Liabil	lity Limited Partnershin:
Signatures of ALL General Partners.	
<del></del>	
All others:	
Signature of an authorized person.	
Fees:	
1 665.	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
Certificate of Ciatab.	Jano (Optional)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Crm Voice, LLC			
	(Must contain the words "Lim	ited Liability Company, "L.L.C.," or "L.C.")	<del></del>
. DTIOLE II			
ARTICLE II -		of the main simulation of the Limited Lie	Lilita Campanya ia
The maning add	iress and street address	of the principal office of the Limited Lia	ability Company is:
Principal Offic	e Address:	Mailing Address:	
3940 NW 79th Av	ve Apt 718	3940 NW 79th Ave Apt 718	
D   El 22466	-		
		egistered Office, & Registered Agent's	
ARTICLE III - (The Limited Liability business entity with	y Company cannot serve as its an active Florida registration.)	egistered Office, & Registered Agent's	dual or another
ARTICLE III - (The Limited Liability business entity with	y Company cannot serve as its an active Florida registration.) ne Florida street addres	egistered Office, & Registered Agent's own Registered Agent. You must designate an individual of the registered agent are:	dual or another
ARTICLE III - (The Limited Liability business entity with	y Company cannot serve as its an active Florida registration.)	egistered Office, & Registered Agent's own Registered Agent. You must designate an individual of the registered agent are:	dual or another
ARTICLE III - (The Limited Liability business entity with	y Company cannot serve as its an active Florida registration.) ne Florida street addres	egistered Office, & Registered Agent's own Registered Agent. You must designate an individual s of the registered agent are:  Name	dual or another
ARTICLE III - (The Limited Liability business entity with	y Company cannot serve as its an active Florida registration.)  D. Mathew Blackburn  3940 NW 79th Ave A	egistered Office, & Registered Agent's own Registered Agent. You must designate an individual s of the registered agent are:  Name	dual or another
ARTICLE III - (The Limited Liability business entity with	y Company cannot serve as its an active Florida registration.)  D. Mathew Blackburn  3940 NW 79th Ave A	egistered Office, & Registered Agent's own Registered Agent. You must designate an individual s of the registered agent are:  Name Apt 718	dual or another

Registered Agent's Signature (REQUIRED)

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.

(CONTINUED)

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR - Manager	Nathan Zale
	3940 NW 79th Ave Apt 718
	Doral, FL 33166
MGR	Jake Setterlun
	3940 NW 79th Ave Apt 718
	Doral, FL 33166
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(Use attachment if necessary)	ក
CLE V: Other provisions, if any.	7
LLF. V: Other provisions, if any.	
	•
REQUIRED SIGNATURE:	
11. wh 1.	
Signature of a member or	an authorized representative of a member
This document is executed in accordance	e with section 605.0203 (1) (b). Florida Statutes. I am aware th
	iment to the Department of State constitutes a third degree felo
D. Mathew Blackburn	

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 WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

#### Crm voice, LLC

is a

#### **Limited Liability Company**

formed or qualified under the laws of Wyoming did on **May 25, 2021**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2021-001007764**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 16th day of September, 2021 at 3:42 PM. This certificate is assigned ID Number 046953943.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.