L21000 458 989

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ry/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Cenified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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October 19, 2021

Via Federal Express

New Filing Section
Florida Department of State
Division of Corporations
The Centre of Tallassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Articles of Conversion of M Howard Pell, CPA LLC,

a New Jersey limited liability company, into

M Howard Pell, CPA LLC, a Florida limited liability company

Dear Sir or Madam:

Enclosed please find Articles of Conversion for Other Business Entity into Florida Limited Liability Company for M Howard Pell, CPA LLC, a New Jersey limited liability company, together with our check in the amount of \$180.00 in payment of the filing fees and for a certified copy of the filing. For informational purposes, a copy of the New Jersey Certificate of Good Standing showing the active good standing status of M Howard Pell, CPA LLC is also enclosed.

Should you have any questions regarding the enclosed, please do not hesitate to contact me. Otherwise, please return the requested certified copy to me with the enclosed Federal Express return envelope.

Sincerely,

JONES FOSTER P.A.

Sherry Wadsworth

Special Assistant Corporate Matters

Enclosures

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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 s.605.1045, Florida Statutes.

1.	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: M HOWARD PELL, CPA 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.)
	New Jersey
	(Enter state, or if a non-U.S. entity, the name of the country)
on	05/16/2013
٠.,	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
	M HOWARD PELL, CPA LLC
	(Enter Name of Florida Limited Liability Company)
	If not effective on the date of filing, enter the effective date:
•	he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
<u>No</u>	e date this document is filed by the Florida Department of State.) te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cument'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 13th day of October	20 21 .
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Aut Hz Printed Name: M. Howard Pell	Title: Authorized Member
Signature(s) on behalf of Other Business Entity:	
Signature: All three Call Printed Name: M. Howard Pell	Title: Authorized Member
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	Title
Signature: Printed Name:	Title:
Signature:Printed Name:	Til
Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnershlp:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

the name of the f	Limited Liability Company	y 15.	
	M HOWARD P		
()	tus: contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A			
The mailing addre	ess and street address of th	ic principal office of the Limited Liab	ility Company is:
Principal Office	Address:	Mailing Address:	
5074 Bleu Lapis Drive		5074 Bleu Lapis Drive	
Boynton Beach, Fl	_ 33437	Boynton Beach, FL 33437	21 (21 (
			— <u>克</u> 曼
	Edward S. Robbins	the registered agent are:	21 OCT 20 M 9: 26
	800 S.E. Third Avenue, S	ulte 300	
		(P.O. Box NOT acceptable)	
	Fort Lauderdale	FL 33316	
	City	Zip	
liability com registered agen statutes relati	pany at the place designated and agree to act in this congree to the proper and complete bligations of my position a	nd to accept service of process for the ed in this certificate, I hereby accept the apacity. I further agree to comply with lete performance of my duties, and I am s registered agent as provided for in C.	e appointment as the provisions of all n familiar with and

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
AMBR	M. Howard Pell		
	5074 Bleu Lapis Drive		
	Boynton Beach, FL 33437		
			
(Use attachment if necessary)			
TCLE V: Other provisions, if any.			
REQUIRED SIGNATURE:			

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)

Typed or printed name of signee

M. Howard Pell, Authorized Member

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

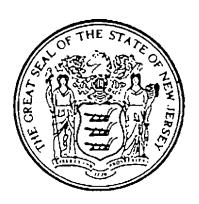
M HOWARD PELL, CPA LLC 0400574307

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on May 16, 2013.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

ROBERT STEELE 80 KEAN ROAD SHORT HILLS, NJ 07078



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 6th day of October, 2021

Elizabeth Maher Muoio State Treasurer

Certificate Number - 6123866466

Verify this certificate anline at

https://www.l.state.nj.w/FYTR_StandingCort/JSP/Verity_Cort.jsp