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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



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09/28/21--01024--026 ++128.75

Office Use Only

#### COVER LETTER

Department of State

**Division of Corporations** 

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:

Certificate of Domestication and Articles of Incorporation/Organization

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication \$ 50.00

Articles of Incorporation and Certified Copy \$ 78.75

Total filing fee \$128.75

**OPTIONAL**:

Certificate of Status \$ 8.75

From: Christopher W. Cercy

Name (printed or typed)

300 S. Pointe Dr. Apt 604

Address Miami Beach, Florida 33139

City, State & Zip

305-799-8555

**Daytime Telephone Number** 

chris@fiercefinancialgroup.com

E-mail address: (to be used for future annual report notification)

INHS53 (3/20)

# **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Fierce Financial Group LLC	
(Name of Resu	Ilting Florida Limited Company)
	es of Organization, and fees are submitted to convert an "Other bility Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	this matter to:
Christopher W. Cercy	
(Contact Person)	<del></del>
Fierce Financial Group LLC	
(Firm/Company)	<del></del>
1680 Michigan Ave. Suite 920	
(Address)	
Miami Beach, FL, 33139	
(City, State and Zip Code) chris@fiercefinancialgroup.com	<del></del>
E-mail Address: (to be used for future annual repo	ort notifications)
For further information concerning this matt	er, please call:
Christopher W. Cercy	at ( 305 ) 799-8555
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amoundollars and drawn on a bank located in the U	it: (All checks processed by this office must be payable in US inited States)
\$150.00 Filing Fees (\$25 for Conversion and Certificate of Status of Organization)	□\$180.00 Filing Fees and Certified Copy □\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

# **Articles of Conversion**

For

# "Other Business Entity"

Into

# 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" immediately prior to the filing of the Articles of Conversion is: Fierce Financial Group 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.
First organized, formed or incorporated under the laws of North Carolina (Enter state, or if a non-U.S. entity, the name of the country)
on05/22/2018 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Fierce Financial Group LLC
(Enter Name of Florida Limited Liability Company)  4. If not effective on the date of filing, enter the effective date:  (The Stational Action Constant Action of Stational Constant Action of
(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.
<del>[</del>
•

Signed t	this 21 day of October	2021
<u>Signatu</u>	re of Authorized Representative of	Limited Liability Company:
Signatur Printed l	re of Authorized Representative:	Title: Member/Manager
<u>Signatu</u>	re(s) on behalf of Other Business En	tity: [See below for required signature(s)]
Signatur	re: CC	
Printed 1	Name: Christopher W. Cercy	Title: Member/Manager
Signatur	re:	
Printed 1	Name:	Title:
Signatur	e:	
Printed 1	Name:	Title:
Signatur	re:	
Printed !	Name:	Title:
Signatur	e:	Title:
Printed I	Name:	Title:
Signatur	e:	
Printed I	Name:	Title:
	da Corporation: re of Chairman, Vice Chairman, Directo	or Officer
	ors or Officers have not been selected,	
If Florid	ta General Partnership or Limited L	iability Partnership:
	e of one General Partner.	
	da Limited Partnership or Limited L res of <u>ALL</u> General Partners.	iability Limited Partnership:
All othe Signatur	rs: e of an authorized person.	
Fees:		
£	Articles of Conversion:	\$25.00
	Fees for Florida Articles of Organizat	on: \$125.00
	Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
`	comments of status.	40.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Compar	ny is:
Fierce Financial Group LLC	
(Must contain the words "Limited I	Liability Company, "L.L.C.," or "LLC,")
ARTICLE II - Address: The mailing address and street address of t	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1680 Michigan Ave.	1680 Michigan Ave.
Suite 920	Suite 920
Miami Beach, FL 33139	Miami Beach, FL 33139
	Name
300 S. Pointe Dr. Apt 604	<del></del>
Florida street address	(P.O. Box <u>NOT</u> acceptable)
Miami Beach	33139 FL
City	Zip
liability company at the place designative registered agent and agree to act in this constantes relating to the proper and comp	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S.,

(CONTINUED)

as provided for in s.817.155, F.S.

Christopher W. Cercy

#### **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/MGR	Christopher M. Corou		
	Christopher W. Cercy 300 S. Pointe Dr. Apt 604		
	Miami Beach, FL 33139		
AMBR	Alexander Kondeas 3420 Morning Lake Dr. #202		
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(Use attachment if necessary)	26		
(Ose attachment it necessary)			
CLE V: Other provisions, if any.			
• • •			
REQUIRED SIGNATURE:			
<b>~</b>			

Typed or printed name of signee

### 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)

any false information submitted in a document to the Department of State constitutes a third degree felony