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

Office Use Only



500374365295

10/07/21--01028--001 **80.00

500374365295 11/17/21--01006--001 **125.00

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W21-135750



October 12, 2021

STEVEN R PRIBRAMSKY PRIBRAMSKY & COMPANY, CPAS 784 US HIGHWAY 1 STE. 24 NORTH PALM BEACH, FL 33408

SUBJECT: FLYWHEEL SOLUTIONS, LLC

Ref. Number: W21000135750

We have received your document for FLYWHEEL SOLUTIONS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the marked sections in the Articles of Conversion. A signature is missing. Also, an additional payment of \$125.00 is needed to process your conversion.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Letter Number: 621A00024825

DANIEL L O'KEEFE Regulatory Specialist II

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COVER LETTER

TO:	New Filing S Division of C				
SHRI	JECT: Flywheel	•			
300	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		sulting Florida Lit	nited Con	npany)
					ed fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concernin	g this matter to	i:	
Steve	n R Pribramsky				
		(Contact Person)			
Pribra	ımsky & Compan	y, CPAs			
	-	(Firm/Company)	•		
784 U	IS Highway 1 Sui	te 24			
		(Address)		_	
North	Palm Beach, FL	33408			
	((City, State and Zip Code)			
stever	n@pribramskycp	a.com			
E-r	nail Address: (to b	e used for future annual re	port notifications)	
For fi	arther informati	on concerning this ma	tter, please cal	l:	
Steve	n R Pribramsky		at (³⁰⁵	\294-8	3137
	(Name of Conta	ict Person)	ar (le) (Day	rtime Telephone Number)
		or the following amou a bank located in the		process	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 Fili and Certified C	•	S185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303

Articles of Conversion 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: Flywheel Solutions, Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized formed or incorporated under the laws of
First organized, formed or incorporated under the laws of
September 29, 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:
(Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
October 2, 2021 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.

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Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
The name of the Elimica Liability Company is.				
Flywheel Solutions, LLC (Must contain the words "Limited Liability	Company "L. L. C. " or "L. C."		-	
(Must comain the words Elimited Liability	Company, E.E.C. Of Block F			
ARTICLE II - Address:				
The mailing address and street address of the pr	incipal office of the Limited L	iability (Compan	ıy is:
Principal Office Address:	Mailing Address:			
81990 Overseas Highway	Same			
Suite 202			_	
Islamorada, FL 33036			_	
The name and the Florida street address of the re Steven R Pribramsky Name				
784 US Highway 1 Suite 24				
Florida street address (P.O.	Box NOT acceptable)			
North Palm Beach	FL 33408			
City	Zip			
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and complete paccept the obligations of my position as registered Agent's Sign	this certificate, I hereby acceptive. I further agree to comply we berformance of my duties, and I distered agent as provided for in ature (REQUIRED)	t the app ith the p am fami	oin <mark>tme</mark> n rovision liar wit	it as is of ali h and
(CONTIN	បសេ)	•	\sim	

ARTICLE IV-

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

"AMBR" = Authorized Member				
"MGR" = Manager MGR	Steven R Pribramsky			
WOIT	784 US Highway 1 Suite 24			
	North Palm Beach, FL 33408			
	47.			
		:		
		p.		
(Harrist American if a grange ma)				
(Use attachment if necessary)				
		* ·		
CLE V: Other provisions, if any.				
	<u> </u>			

Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Steven R Pribramsky

REQUIRED SIGNATURE:

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)