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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Groundswell Advisors,	LLC.
(Name of Resulting Florida Lim	ted Company)
The enclosed Articles of Conversion, Articles of Organizat Business Entity" into a "Florida Limited Liability Compan	ion, and fees are submitted to convert an "Other y" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:	
Contact Person) Grand Swell Advisors, LCC. (Firm/Company)	_
Groundswell Advisors LCC.	_
(Firm/Company) 39 West Blue Coral Ar (Address)	<u></u>
Sonta Rosa Brack FL 324502	
(City, State and Zip Code) Savah sphill, 15 11 @gna; /- com E-mail Address: (to be used for future animal report notifications)	-
For further information concerning this matter, please call:	
Savah Phillis at (120 (Area Code) 795 2695 (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks dollars and drawn on a bank located in the United States)	
\$\bigsup \\$150.00 \text{ Filing Fees} \\ (\\$25 \text{ for Conversion} \\ \\$ \\$125 \text{ for Articles} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-
Mailing Address:	Street Address:
New Filing Section Division of Corporations	New Filing Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

P.O. Box 6327

Tallahassee, FL 32314



October 7, 2021

SARAH KROLICK 39 W BLUE CORAL DR SANTA ROSA BEACH, FL 32459

SUBJECT: GROUNDSWELL ADVISORS, LLC

Ref. Number: W21000133817

We have received your document for GROUNDSWELL ADVISORS, LLC and your check(s) totaling \$150.00. However, the document has not been filed and is being retained in this office for the following:

The incorrect form was submitted to our office.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 821A00024377

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: Groundswell Advisors, LLC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of $\frac{Co/orado}{\text{(Enter state, or if a non-U.S. entity, the name of the country)}}$ on $\frac{0.5/13/2019}{\text{(Enter state, or if a non-U.S. entity, the name of the country)}}$
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Groundswell Advisors, 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.
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 29 day of 1 lovember	20_2/
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Printed Name: Sand Phillips	Title: Principal
Signature(s) on behalf of Other Business Entity:	
Signature: Sarah Phillips Printed Name: Sarah Phillips	_ Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> 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

Groundswell Alvisors, LLC.
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
39 West Blue Coral by Santa Rosa Buch, F1 32459	Santa Rosa Beach, FZ 32459
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registerusiness entity with an active Florida registration.) The name and the Florida street address of the residual control of the residual contro	red Agent. You must designate an individual or another
DOCCER	Tago Somes Krolick
Name	
39 West 3/ve Cor Florida street address (P.O.	Box NOT acceptable)
Sarta Rosa Bench City	
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S

(CONTINUED)

A	R	TI	CI	LE	I۷٠

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

<u>l'itle:</u> 'AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	2/-1/
MGR = Manager	Sarah Phillips
1.101)	39 West Blue Coral A
	Santa Cosa Beach, Fl 32
(Use attachment if necessary)	75.
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LE V: Other provisions, if any.	ن -
REQUIRED SIGNATURE::::::::::::::::::::::::::::::::::::	_
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Signature of a member or	r an authorized representative of a member
This document is executed in accordance	e with section 605.0203 (1) (b). Florida Statutes, I am awai ument to the Department of State constitutes a third degree
as provided for in s.817.155, F.S.	union to the Department of State constitutes a time degree
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Sanh	
Sanh	yped or printed name of signee Filing Fees