# L22000000978

| (Requestor's Name)  |
|---|
| (Address)   |
| (Address)   |
| (City/State/Zip/Phone #)  |
| (Only Control of the |
| PICK-UP WAIT MAIL   |
| (Business Entity Name)  |
| (Document Number)   |
|   |
| Certified Copies Certificates of Status   |
| Special Instructions to Filing Officer  |
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2022 JAN -3 PM 2: 57 SECRETARY OF STATE DALLAHAS SEE, FL

## Ausley McMullen

#### ATTORNEYS AND COUNSELORS AT LAW

123 SOUTH CALHOUN STREET
P.O. BOX 391 (ZIP 32302)
TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560

December 30, 2021

Secretary of State
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Eulogia, Inc.

Dear Madam/Sir:

Enclosed for filing are the Articles of Conversion for Eulogia, Inc., and Articles of Organization for Eulogia, L.L.C., which are being submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with §605.1045, F.S. Also enclosed is our check in the amount of:

□ \$150.00 □ \$155.00 □ \$180.00 ■ \$185.00

Filing Fee (\$25 for Filing Fees & Filing Fees & Filing Fees, conversion & \$125 Certificate of Status

Organization □ \$180.00 ■ \$185.00

Filing Fees & Filing Fees, Certified Copy & Certificate of Status

We will retrieve the certified copy. Please do not hesitate to call me at 850-425-5317 if you have any questions.

Thank you in advance for your usual assistance in these matters.

Sincerely,

anaye G. Pieczynski

<u>VIA HAND DELIVE</u>RY

Associate

Ausley McMullen

Florida Bar #: 1011787

/JGP Enclosures

FILED

## 2022 JAN -3 PM 2: 57

## For "Other Business Entity" Into

SECRETARY OF STATE TALLAHASSEE, FL

### 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: Eulogia, 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  |
| (Enter state, or if a non-U.S. entity, the name of the country)  |
| 08/09/1996<br>on   |
| (date of organization, formation or incorporation)   |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  |
| Eulogia, L.L.C.  |
| (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.           |

day of Declimber 2021 Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: Collo 13 Printed Name: Adele Robins Perry Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Morrow Title: Registered Agent Printed Name: Thomas E. Perry Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Title: Signature: Printed Name: \_\_\_\_\_\_Title: \_\_\_\_\_ Printed Name: \_\_\_\_\_\_ Title: \_\_\_\_\_ Signature: Title: Printed Name:\_\_\_\_\_ If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (Optional)

\$5.00 (Optional)

Certificate of Status:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:  |  |                          |
|--|--|--------------------------|
| The name of the Limited Liability Company i  | s:   |                          |
|  |  |                          |
| Eulogia, L.L.C.  |  |                          |
| (Must contain the words "Limited Liab  | ility Company, "L.L.C.," or "LLC.")                |                          |
| ARTICLE II - Address:  |  |                          |
| The mailing address and street address of the  | principal office of the Limited Liabilit           | y Company is:            |
| Principal Office Address:  | Mailing Address:                                   |                          |
| 3130 Persimmon Dr.   | 3130 Persimmon Dr.                                 |                          |
| Tallahassee, FL 32312  | Tallahassee, FL 32312                              | <del></del>              |
| ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registrations) business entity with an active Florida registration.)  The name and the Florida street address of the Adele Robins Perry  | gistered Agent. You must designate an individual o | 2022 JAN -3<br>SECRETAGE |
| National Nat |  | 58 <b>7</b>              |
| ivai   | ne   | PH 2<br>OF S             |
| 3130 Persimmon Dr.   |  | 2: 57<br>STAT<br>E. FL   |
| Florida street address (P.   | O. Box NOT acceptable)                             | 7<br>TE                  |
| Tallahassee  | FL <sup>32312</sup>                                |                          |
| City   | Zip  |                          |

Having been named as registered agent and to accept service of process for the above stated limited 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..

Registered Agent's Signature (REQUIRED

(CONTINUED)

### ARTICLE IV-

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

| "MGR" = Manager                 |                       |
|---------------------------------|-----------------------|
| AMBR                            | Adele Robins Perry    |
|                                 | 3130 Persimmon Dr.    |
|                                 | Tallahassee, FL 32312 |
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|                                 |                       |
| (Use attachment if necessary)   |                       |
| LE V: Other provisions, if any. |                       |
|                                 |                       |
| DECITIOED CICNATUDE.            |                       |
| <u>REQUIRED</u> SIGNATURE:      | lino Perra            |

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.

Adele Robins Perry

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)