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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use Or	



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Manual Principles

### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Baker Mc Elma Strategies LLC (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Baker Mc Eiron Strategies  (Firm/Company)  100 Spring Lake Dr.  (Address)
100 Spring Lacke Dr. (Address)
Very Beach FL 32962 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person)  (Name of Contact Person)  (Name of Contact Person)  (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
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Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, 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:
Baker McElong Strategies Toc (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>listed as Corps but Should have been hell</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on 9/1/2013 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Baker MCIE Iron Strategies LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 1/21/2032.  (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 21 St day of January	_20_ <i>_2_2</i> .
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative:  Printed Name: Diane McElm	Fille: President/Manager
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)
Signature:  Printed Name: Notane McElorg  Ac A	Title: President/Minager
Signature: Buku Printed Name: Joseph Baka	_Title: <u>Acanage</u>
Signature: Printed Name:	Title
Printed Name:	_ 1 tite
Signature:Printed Name:	701
Printed Name:	
Signature:Printed Name:	
Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers 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 Liabilit Signatures of <u>ALL</u> General Partners.	y 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

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Baker McElran Straterye's (Must contain the words "Limited Lability"	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
100 Spring Lake Dr Moit 101 1000 Beach, FL 32960	S. Yarnsonth, MA U2 Clay
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
Danne McEll Name	259 AHA "
Florida street address (P.O.	96
Vero Beach City	FL 32962 Zip
liability company at the place designated in	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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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..

Title:	Name and Address:
"AMBR" = Authorized Member	•
"MGR" = Manager	7) 80
Manger - MOR	100 Spring Laked Dr. Unit
/	100 Syx-ing Kalles 12 20960
	year bearing to
(Use attachment if necessary)	
(Ose amaemiem is insectionly)	
CLE V: Other provisions, if any.	
	<u> </u>
DEQUIDED SIGNATURE.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member of	r an authorized representative of a member
Signature of a member of	r an authorized representative of a member se with section 605.0203 (1) (b), Florida Statutes, I am aware t
Signature of a member of This document is executed in accordance any false information submitted in a doc	se with section 605,0203 (1) (b), Florida Statutes, I am aware t
Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	the with section 605.0203 (1) (b). Florida Statutes, I am aware to unient to the Department of State constitutes a third degree fel
Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	te with section 605.0203 (1) (b), Florida Statutes, I am aware to unent to the Department of State constitutes a third degree fel
Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	r an authorized representative of a member se with section 605.0203 (1) (b). Florida Statutes. I am aware to ument to the Department of State constitutes a third degree fel  Typed or printed name of signee  Filing Fees

ARTICLE IV-