# L2200030654

(Requestor's Name)
(Address)
(Address)
(variess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Nume,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
herace no Doc

Office Use Only



500380539925

FILED Jan 27, 2022 08:00 AM Secretary of State

## **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: Security Financial Management, 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)
August 4, 1994 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:
Security Financial Management, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: January 28, 2022  (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.



DocuSign Envelope ID: D4572BFA-A5D7-46BA-AFEF-3DAD69F20253\* Signed this 28th day of January 2022 Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: Printed Name: David P. Allen Manager Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: David P. Allen Director, President Printed Name: Title: Signature: 190EDOFGOPAHES. Lovaglio Director, Secretary Printed Name: Title: Michael D. Allen Signature: Printed Name: Michael D. Allen Director, VP Title: Signature: Printed Name:\_\_\_\_ Signature: \_\_\_\_\_ 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

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Δ	RT:	$\Gamma$	FI	I = N	am	Α.
$\sim$	<b>R</b> 1				41111	т.

The name of the Limited Liability Company is:

Security Financial Management, LLC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
2420 S LAKEMONT AVE	2420 S LAKEMONT AVE
Suite 120	Suite 120
Orlando, FL 32814	Orlando, FL 32814

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

David P. Allen	
N	ame
2420 S LAKEMONT	AVE, Suite 120
Florida street address (1	P.O. Box NOT acceptable)
Orlando	FL 32814
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)



David P. Allen

### 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	David P. Allen 2420 S LAKEMONT AVE, Suite 120		
MGR			
	Orlando, FL 32814		
MGR	Frank S. Lovaglio 2420 S LAKEMONT AVE, Suite 120		
MOK			
	Orlando, FL 32814		
MGR	Michael D. Allen		
	2420 S LAKEMONT AVE, Suite 120		
	Orlando, FL 32814		
(Use attachment if necessary)			
•			
CLE V: Other provisions, if any.			
effective date of these Articles of Organ	ization is January 28, 2022.		
<u>REOUIRED SIGNATURE:</u>			
AF9/C499BTE14DU			
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		
	ment to the Department of State constitutes a third degree felong		

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agents 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)