# 12200058854

(Requestor's Name)	
(Address)	
(Address)	<del></del>
(Audiess)	
	_
(City/State/Zip/Phone	#)
_	_
PICK-UP WAIT	MAIL
(Business Entity Name	-)
(Business Emity Name	-)
(Document Number)	
Certified Copies Certificates of	of Status
Special Instructions to Filing Officer:	
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## **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corporations		
SUBJECT: CENTSIBLE CLICKS LLC		
SUBJECT: (Name of	Resulting Florida Limit	ed Company)
The enclosed Articles of Conversion, A Business Entity" into a "Florida Limited	rticles of Organization. d Liability Company	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concer	ming this matter to:	
ALEX ENGLARD		
(Contact Person)		
INTERSTATE FILINGS LLC		
(Firm/Company)		
301 MILL ROAD STE U5		
(Address)		
HEWLETT, NY 11557		
(City, State and Zip Co	de)	
E-mail Address: (to be used for future annu	al report notifications)	
For further information concerning this	matter, please call:	
ALEX ENGLARD	at (	)
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following a dollars and drawn on a bank located in		rocessed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  □ \$155.00 Filing Fe and Certificate of Status	ees \$\Bigsiz\$\$\$\$\Bigsiz\$	
Mailing Address:  New Filing Section  Division of Corporations P.O. Box 6327		Street Address:  New Filing Section  Division of Corporations  The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



January 27, 2022

ALEX ENGLARD 301 MILL RD STE U5 HEWLETT, NY 11557

SUBJECT: CENTSIBLE CLICKS LLC

Ref. Number: W22000008723

We have received your document for CENTSIBLE CLICKS LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The last page of articles of organization is missing. Please resubmit with the last page of the articles.

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

(N)

Letter Number: 422A00002156

# **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: CENTSIBLE CLICKS LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
(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)
12/14/2013
on 12/14/2013 tdate of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
CENTSIBLE CLICKS 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.)
<u>Note:</u> 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 10 day of J	anuary 20 22
Signature of Authorized Repr	esentative of Limited Liability Company:
Signature of Authorized Repres	entative: Baruch Leifer
Printed Name: BARUCH LEIFER	Title: MANAGING MEMBER
	Business Entity:  See below for required signature(s)
Signature: Baruch	Leifer Title: MANAGING MEMBER
Printed Name: BARUCH LEIFER	Title: MANAGING MEMBER
Signature:	Title:
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	Title:
Printed Name:	Titte.
Signature:	
Printed Name:	Title:
Chantur	
Printed Name:	Title:
Timed Fame.	
If Florida Corporation:	<u>.</u>
Signature of Chairman, Vice Cha	
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	
	or Limited Liability Limited Partnership:
Signatures of ALL General Parti	iers.
All others:	
Signature of an authorized person	n.
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles	
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

### NY

ARTICLE 1 - Name:	
The name of the Limited Liability C	Company is:
CENTSIBLE CLICKS LLC	
(Must contain the words "	Limited Liability Company, "L.L.C.," or "LLC.")
<b>ARTICLE II - Address:</b> The mailing address and street address	ess of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3241 N 47 AVE	3241 N 47 AVE
HOLLYWOOD, FL 33021	HOLLYWOOD, FL 33021
BARUCH LEIFE	R
	Name
3241 N 47 AVE	
Florida street a	ddress (P.O. Box <u>NOT</u> acceptable)
HOLLYWOOD	FL 33021
	lity 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. Thereby 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.

	Baruch Leifer
•	(Registered Agent's Signature (REQUIRED).

#### ARTICLE IV-

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

BARUCH LEIFER
3241 N 47 AVE
HOLLYWOOD, FL 33021
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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.

**BARUCH LEIFER** 

Typed or printed name of signee

#### Filing Fees

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