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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO:	New Filing Se Division of C							
CHB	JECT: Consciou	ıs Compass, LLC						
SUD.	JEC1:	(Name of Res	sulting Florida L	imited Cor	mpany)			
Busir	ness Entity" into		iability Compa	any" in a	nd fees are submitted to accordance with s. 605.		"Othe	r
· ·ciis	e rettim an corre	spondence evinceriii.	e ms mane	· · ·				
Russ	ell Lawrence, CP/	4						
		(Contact Person)					~>	
Zach	arias Lawrence Ll					• •	320	
		(Firm/Company)				·. ·	2022 APR -4	
1 000	Willow Ave, Ste					: · .	70 1	
		(Address)					1 -	اب) ن
Tamp	oa, FL 33606						+ PH	(T) (D)
	(C	Sity, State and Zip Code)	•				3: 02	
	ell@zachcpa.com			_			02	
E-	mail Address: (to b	e used for future annual re	port notifications	s }		•		
For fi	urther informatio	on concerning this ma	tter, please ca	II:				
Russ	eil Lawrence, CP/	4	_at (<u>813</u>	254-	3206, ext 4			
	(Name of Conta	et Person)	(Area Co	de) (Da	ytime Telephone Number)			
		or the following amou a bank located in the			sed by this office must	t be payable	in US	
(\$25 f & \$12	50.00 Filing Fees or Conversion 5 for Articles ganization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fil and Certified 0		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
	Mailing Addr New Filing So Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		New Divis The C 2415	et Address: Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Sui hassee, FL 32303	ite 810		

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: Conscious Compass, 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)
07/28/2016 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:
Conscious Compass, 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 th	nis 21st	_day of _March	_ 20		
Signatur	e of Author	ized Representative of Limit	ed Liability Company:		
Signature Printed N	e of Authoriz ame: Julia We	ed Representative: Whatells	Title: President		
Signature	e(s) on behal	f of Other Business Entity:	See below for required signature(s)		
Signature	· Mio	Well	Title: President		
Printed N	ame: <u>Julia W∈</u>	ells	_ Title: President		
Signature Printed N	: ame:		Title:		
Signature	:		_Title:		
Printed N	ame:		_ Title:	•	
Signature	:	·*· "	_ Title:		
Signature	:		Title:		
rimed is	aine	<u> </u>	Title.		
Signature					
Timed IV	ame	<u> </u>	Thic.		
Signature		n: . Vice Chairman, Director, or Control have not been selected, an Incompared to the control of			
	a General Pa of one Gener	rtnership or Limited Liabilit ral Partner.	y Partnership:		
		rtnership or Limited Liabilit neral Partners.	y Limited Partnership:		
All other Signature	s: of an authori	zed person.		٠.	202
Fees:				:. : •	2022 APR
Fe C	rticles of Co ees for Floric ertified Copy ertificate of S	la Articles of Organization:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		-4 PM 3: 02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Conscious Cor	mpass, LLC		
		d Liability Company, "L.L.C.," or "LLC,")	
ARTICLE II	- Addross		
		f the principal office of the Limited	d Liability Company is:
-		·	
Principal Off	ice Address:	Mailing Address:	
9402 Woodbay	Drive	9402 Woodbay Drive	
Tampa, FL 336		Tampa, FL 33626	
business entity wi	the Florida street address of the Julia Wells	of the registered agent are: Name	2022 APR
		Name	F 1
	9402 Woodbay Drive		
	Florida street addres	ss (P.O. Box <u>NOT</u> acceptable)	<u> </u>
	Tampa	FL 33626	02
	City	Zip	7.
~	• • • • • • • • • • • • • • • • • • • •	t and to accept service of process fo acted in this certificate, I hereby acc	

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR/MGR	Julia Wells
	9402 Woodbay Drive
	Tampa, FL 33626
	
	<u> </u>
(Use attachment if necessary)	
•	

REQUIRED SIGNATURE:

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.

Julia Wells

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)

Julia Wells (conscious (compass, LLC 413-695-3940 9402 woud bay Dr Tampa FL 33626