1000230653

| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
| Bunda Handy gave Bunda Handy gave Lic to name | | |
| the commission | | |
| · | | |

Office Use Only



100378302531

12 33 31--03003--016 **35,00

05/31/22--01041--001 **90.00

05/31/22--01041--002 *+25.00

MAY 3 1 2022

COVER LETTER

| TO: New Filing'S Division of C | | | | | | |
|--|--|---|--|-------------|----------------|--|
| SUBJECT: | (Name of Res | Bonds Sulting Florida Limited Con | npany) | _ | | |
| | | | d fees are submitted to coordance with s. 605. | | | Other |
| Please return all corr | espondence concernin | g this matter to: | | | | |
| Brend | (Contact Person) | | | | | |
| 24 <i>H</i> R | Bail Bonds (Firm/Company) | | | | | |
| <i>2303</i> _ | (Address) | 1 ST.16 | | | 2022 H | 4 17 47 |
| FT. Pie | City, State and Zip Code) | 34944 | | | 2022 HAY 17 PH | 7 (- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 |
| E-mail Address: (to b | be used for future annual re | port notifications) | | | \ddot{c} | * ==] * == 1 |
| For further informati | on concerning this ma | tter, please call: | | | Ť. | |
| Prenda (Name of Conta | Handur net Person) | at (<u>772-</u>) <u>3</u> (Area Code) (Day | 23 - 4942. vtime Telephone Number) | | | |
| | for the following amou a bank located in the | • | sed by this office must | be paya | ible in | ı US |
| \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | □S155.00 Filing Fees and Certificate of Status | □\$180.00 Filing Fees and Certified Copy | ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status | | | |
| Mailing Address: | | Stree | t Address: | | | |

New Filing Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

New Filing Section Division of Corporations The Centre of Tallahassee 2415 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: \(\frac{\gamma 4HR}{\chi} \frac{\chi_{\chi\in_{\chi\ti}\chi_{\chi\ti}\chi_{\chi\ti}\chi_{\chi\ti}\chi_{\chi\ti}\chi_{\chi\ti}\chi_{\chi_{\chi_{\chi_{\chi_{\chi\ti}\chi_{\chi\ti}\chi_{\chi\ti}\chi_{\chi_{\chi\ti}\chi_{\chi\ti}\chi_{\chi\ti}\chi_{\chi |
|--|
| 2. The "Other Business Entity" is a <u>Corporation</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 Floride. (Enter state, or if a non-U.S. entity, the name of the country) |
| on <u>64/7/15</u> (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| 24HR Bail Bond LLC (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: |

5. The plan of conversion has been approved in accordance with all applicable statutes.

document's effective date on the Department of State's records.

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.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

| Signed this 23 day of March | _20 <u>22 · </u> |
|---|--|
| Signature of Authorized Representative of Limit | ted Liability Company: |
| Signature of Authorized Representative: Drei Printed Name: Breada Handy | nda Plandy Title: Owner. |
| Signature(s) on behalf of Other Business Entity: [| See below for required signature(s) |
| Signature: Brenda Handy | |
| Printed Name: Brenda Handaj | Title: OWNER. |
| Signature: | |
| Printed Name: | _ Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | m) I |
| Printed Name: | Title: |
| Signature:Printed Name: | Trial and the second se |
| Printed Name: | Little: |
| Signature: | |
| Printed Name: | _ Title: |
| <u>If Florida Corporation:</u> Signature of Chairman, Vice Chairman, Director, or Corporation | |
| If Directors or Officers have not been selected, an Inc | corporator must sign. |
| If Florida General Partnership or Limited Liabilit | ty Partnership: |
| Signature of one General Partner. | |
| If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners. | ty 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:

| (Must contain the words "Limited Liability | 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: |
| 2303 N US HWY 1 37.16 F7. Pierce - FL 34946 | 2303 N- USHWY 1 ST. 16 FT. Rience - FL 34946 |
| i valite | gistered agent are: Cancle State State |

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.. Brenda Handet
Registered Agent's Signature (REQUIRED)

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

(CONTINUED)

| ٨ | D | TI | C1 | | 11 | 1_ |
|---|---|----|----|-----|----|----|
| | ĸ | | | . г | | |

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 \mathcal{MGR} | Brende Heady |
| | Brende Handy 2303 N US Huy 1 - 57 16 FT. Pience - FL 34946. |
| | FI. Pience-FL 34946. |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| (Use attachment if necessary) | |
| | |
| | |
| CLE V: Other provisions, if any. | |
| | |
| | |
| | |
| REQUIRED SIGNATURE: | |
| Brenda Hande | , / |
| Menda Handl | |
| 6: | |
| This document is executed in accordance | an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware the |
| any false information submitted in a docu | iment to the Department of State constitutes a third degree felo |
| as provided for in s.817.155, F.S. | |
| | |
| Ту | yped 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)