

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
(6	,,, , , , , , , , , , , , , , , , , , 	,
PICK-UP	MAIT WAIT	MAIL
(Bu	isiness Entity Nar	me)
- (2)		
(Uc	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

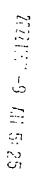




200387447672

05/009/22--01041--008 **155.00







COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: ACCOUNT SMART	LLC
(Name of Resulting Florida	
The enclosed Articles of Conversion, Articles of Organ Business Entity" into a "Florida Limited Liability Com	
Please return all correspondence concerning this matter	to:
COURTNEY MAY (Contact Person)	
ACCOUNT SMART LLC	
(Firm/Company)	
4905 SE CAPSTAN AVE #	135
(Address)	
STUART FIDEIDA 34997	,
STUART FLORIDA 34997 (City, State and Zip Code)	
Courtney may on line e quai E-mail Address: (to be used for future annual report notification	
For further information concerning this matter, please c	all:
COURTNEY MAY at (609 (Area C	335-7257
(Name of Contact Person) (Area C	Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All check dollars and drawn on a bank located in the United States \$150.00 Filing Fees (\$25 for Conversion and Certificate of Status) Enclosed is a check for the following amount: (All check dollars and certificate of Status)	s) iling Fees □\$185.00 Filing Fees.
of Organization)	Continue of States
Mailing Address:	Street Address:
New Filing Section Division of Corporations	New Filing Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	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: ACCOUNT SMACT LLC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a
Fir	st organized, formed or incorporated under the laws of PENNSYLVANIA (Enter state, or if a non-U.S. entity, the name of the country)
on	2/4/2014 (date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
	ACCOUNT SMART LLC
	(Enter Name of Florida Limited Liability Company)
4. (T!	If not effective on the date of filing, enter the effective date: <u>PATE OFFIUDG</u> he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after

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

the date this document is filed by the Florida Department of State.)

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 3 day of MAY	_ 20 <u>22</u>
Signature of Authorized Representative of Limi	•
Signature of Authorized Representative: Printed Name: Courtney May	FILE PRESIDENT
Signature(s) on behalf of Other Business Entity:	
Signature: Covarney MAY	
Printed Name: Courtney MAY	Title: VOESIDEN
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> 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 (Outlined)
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Certificate of Status.	ψυ.σο (Opnonar)

TO 77 ST 25

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
ACCOUNT SMART LL	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LL.C.")
ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4905 SE CAPSTAN AVE #B5 STUARLY FL 34997	4905 SECAPSTAN AVE #B5 STUARET FL 34997
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registerousiness entity with an active Florida registration.) The name and the Florida street address of the results	red Agent. You must designate an individual or another
The hame and the Florida street address of the re	gistered agent are.
COURTNEY	MAY
4905 SE CAPS	TAN AVE #B5
Florida street address (P.O.	
STUART	FL 34997 Zip
City	Zip
	accept service of process for the above stated limite

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)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MG(2)	COURTNEY MAY 4905 SE CAPSTAN AVES STUART FL 34997
·	
	
(Use attachment if necessary)	

Ų. **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.

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)