

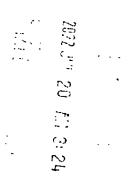
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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# COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Wise Software Solutions, LLC			
(Name of Resul	ting Florida Limi	ted Company)	<del></del>
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lial	s of Organizat bility Company	ion, and fees are submitted " in accordance with s. 60	Lto convert an "Other 05.1045, F.S.
Please return all correspondence concerning	this matter to:		
Virginia Wise			
(Contact Person)		•	
Wise Software Solutions, LLC			
(Firm/Company)		_	
4621 1st Ave NW			
(Address)		-	
Naples, FL 34119			
(City, State and Zip Code)		_	
gwise7365@gmail.com			
E-mail Address: (to be used for future annual repo	ort notifications)	-	
For further information concerning this matter	er, please call:		
Virginia Wise	at ( <u>303</u>	,601-7365	
(Name of Contact Person)	(Area Code	(Daytime Telephone Number	er)
Enclosed is a check for the following amoun dollars and drawn on a bank located in the U	t: (All checks prited States)	Processed by this office mu Charle Africach Fis	ust be payable in US 472.50 Practions 6
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\$155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Co	Fees S185.00 Filing Fee  Certified Copy, and Certificate of Status	\$155 Less
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahasse 2415 N. Monroe Street, S Tallahassee, FL 32303	

## **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.

outlines.	
1. The name of the "Other Business Entity" immediately prior to the filing of the Ar Wise Software Solutions, LLC	rticles of Conversion is:
(Enter Name of Other Business Entity)	·
2. The "Other Business Entity" is a Limited fiability company	
(Enter entity type. Example: corporation, limited partnership, general partnership, cor	mmon law or business trust, etc.)
First organized, formed or incorporated under the laws of	the name of the country)
July 22, 2009 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached A	Articles of Organization:
Wise Software Solutions, LLC	
(Enter Name of Florida Limited Liability Company)	·
(The effective date: Cannot be prior to date of receipt or filed date nor more that 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 document's effective date on the Department of State's records.	
5. The plan of conversion has been approved in accordance with all applicable statut	es.
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members having appropriate such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.</li> </ol>	oraisal rights the amount to
	(T) The
	• •

Signed this 30th day of June	20 <u>22</u>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:	
Signature of Authorized Representative: Printed Name: Virginia Wise	Title: Manager/Owner
Signature(s) on behalf of Other Business Entity:	
Signature: /// // // // Printed Name: Virginia Wise	
Drinted Nome: Virginia Miso	That Manager/Owner
Trinted Painte. Virgina VVise	Title: Manager/Owner
Signature:	
Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Cignatura	
Signature: Printed Name:	Title
rimed Name.	
Signature:	
Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Dantaeachin and Limited Linkill	4. I imia d Danamanhia.
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Elmited Partnersmp:
organiales of MEE General Paralets.	
All others:	
Signature of an authorized person.	
_	
Fees:	
And Jan of C	# <b>7</b> . 00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)
Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
certificate of status.	JJ.OU (Optional)

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

'AMBR" = Authorized Member	
'MGR" = Manager	
MGR	Virginia Wise
	4621 1st Ave NW
	Naples, FL 34119
	· · · · · · · · · · · · · · · · · · ·
Use attachment if necessary)	
Use attachment if necessary)  LE V: Other provisions, if any.	
•	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	
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LE V: Other provisions, if any.  REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fe
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155. F.S.  Virginia Wise	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware ment to the Department of State constitutes a third degree fe
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155. F.S.  Virginia Wise	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

#### CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

Wise Software Solutions, LLC

is a

#### Limited Liability Company

formed or registered on 07/22/2009 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20091389105.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/08/2022 that have been posted, and by documents delivered to this office electronically through 02/10/2022 @ 05:37:15.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 02/10/2022 @ 05:37:15 in accordance with applicable law. This certificate is assigned Confirmation Number 13784447



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/Certificate/SearchCriteria.do/entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://

www.sos.state.co.us.click. "Businesses, trademarks, trade names" and select. "Frequently Asked Questions."