

# L22000329738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

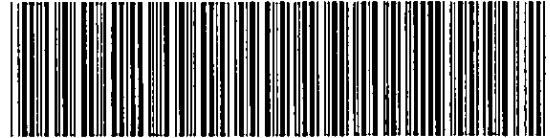
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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07/18/22--01025--005 \*\*150.00

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2022 JUL 18 PM 1:07  
TALLAHASSEE, FLORIDA

HL

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** VEILLARD-LACROIX INSURANCE AND FINANCIAL SERVICES, LLC  
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

GALIANIE V. LACROIX

(Contact Person)

VEILLARD-LACROIX INSURANCE AND FINANCIAL SERVICES

(Firm/Company)

5500 NW 49 WAY

(Address)

COCONUT CREEK, FL 33073

(City, State and Zip Code)

VLINSURANCES@GMAIL.COM

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

GALIANIE V. LACROIX

(Name of Contact Person)

at ( 954 ) 319-2494

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☒ \$150.00 Filing Fees  
( \$25 for Conversion  
& \$125 for Articles  
of Organization )

☐ \$155.00 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:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

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:  
VEILLARD-LACROIX INSURANCE AND FINANCIAL SERVICES, INC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a CORPORATION

(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of FLORIDA

(Enter state, or if a non-U.S. entity, the name of the country)

on JANUARY 20, 2011

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Article of Organization**:  
VEILLARD-LACROIX INSURANCE AND FINANCIAL SERVICES, 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.

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2011 JUL 18 PM 1:07  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

Signed this 25th day of May 2022

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: \_\_\_\_\_  
Printed Name: GALIANE V. LACROIX Title: MGR

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: G. Lacroix  
Printed Name: GALIANE V. LACROIX Title: PRESIDENT

Signature: Ronald Lacroix  
Printed Name: RONALD LACROIX Title: VICE-PRESIDENT

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.  
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.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**All others:**

Signature of an authorized person.

**Fees:**

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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2022 JUL 18 PM 1:07  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

GALIANIE V. LACROIX

5500 NW 49 WAY

COCONUT CREEK, FL 33073

MGR

RONAL LACROIX

5500 NW 49 WAY

COCONUT CREEK, FL 33073

AMBR

MANDY LACROIX

5500 NW 49 WAY

COCONUT CREEK, FL 33073

AMBR

PHILLIP A. LACROIX

5500 NW 49 WAY

COCONUT CREEK, FL 33073

(Use attachment if necessary)

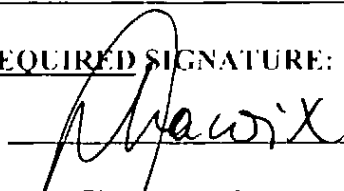
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SOUTH FLORIDA  
TALLAHASSEE, FL 32301

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**ARTICLE V: Other provisions, if any:**

THE PURPOSE OF THIS LIMITED LIABILITY COMPANY IS TO TRANSACT ANY AND ALL LAWFUL BUSINESS.

**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.

Galianie V. Lacroix

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)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

VEILLARD-LACROIX INSURANCE AND FINANCIAL SERVICES, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

5500 NW 49 WAY

COCONUT CREEK, FL 33073

### Mailing Address:

5500 NW 49 WAY

COCONUT CREEK, FL 33073

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

GALIANIE V. LACROIX

Name

5500 NW 49 WAY

Florida street address (P.O. Box **NOT** acceptable)

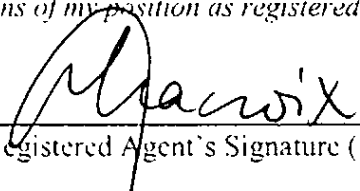
COCONUT CREEK

FL 33073

City

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, 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)

FILED  
2022 JUL 18 PM 1:01  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**Electronic Articles of Incorporation  
For**

P11000006809  
FILED  
January 20, 2011  
Sec. Of State  
scollins

VEILLARD-LACROIX INSURANCE AND FINANCIAL SERVICES, INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:

VEILLARD-LACROIX INSURANCE AND FINANCIAL SERVICES, INC

**Article II**

The principal place of business address:

2551 NW 41ST AVE  
410  
LAUDERHILL, FL. 33313

The mailing address of the corporation is:

2551 NW 41ST AVE  
410  
LAUDERHILL, FL. 33313

**Article III**

The purpose for which this corporation is organized is:

INSURANCE AND FINANCIAL SERVICES

**Article IV**

The number of shares the corporation is authorized to issue is:

100

**Article V**

The name and Florida street address of the registered agent is:

GALIANIE V LACROIX  
2551 NW 41ST AVE  
410  
LAUDERHILL, FL. 33313

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: GALIANIE V. LACROIX

FILED  
2012 JUL 18 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P11000006809  
FILED  
January 20, 2011  
Sec. Of State  
scollins

### Article VI

The name and address of the incorporator is:

GALIANIE VEILLARD LACROIX  
2551 NW 41ST AVENUE  
410  
LAUDERHILL, FL 33313

Electronic Signature of Incorporator: GALIANIE V. LACROIX

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

### Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
GALIANIE V LACROIX  
2551 NW 41ST AVE # 410  
LAUDERHILL, FL. 33313

Title: VP  
RONALD LACROIX  
2551 NW 41ST AVE # 410  
LAUDERHILL, FL. 33313

### Article VIII

The effective date for this corporation shall be:

01/20/2011

FILED  
2011 JUL 18 PM 1:07  
CLERK OF STATE  
TALLAHASSEE, FLORIDA