# 122000356739

| (F                      | Requestor's Name)    |           |
|-------------------------|----------------------|-----------|
| (A                      | address)             |           |
| (A                      | Address)             |           |
| (C                      | City/State/Zip/Phone | e #)      |
| PICK-UP                 | WAIT                 | MAIL      |
| (E                      | Business Entity Nam  | ne)       |
| (0                      | Occument Number)     |           |
| Certified Copies        | Certificates         | of Status |
| Special Instructions to | o Filing Officer:    |           |
|                         |                      |           |
|                         |                      |           |
|                         |                      |           |
|                         | Office Use Onl       | <br>v H   |

Office Use Only



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08/05/22--01010--006 \*\*185.00

## **COVER LETTER**

| TO: New Filing S<br>Division of O  |   |                                      |  |
|--|---|--------------------------------------|--|
| SUBJECT: DENISE  | A MAXWELL REAL ES                                     | TATE LLC                             |  |
| 30b3EC1  | (Name of Res  | sulting Florida Limite               | ted Company)   |
|  |   | _                                    | ion, and fees are submitted to convert an "Othey" in accordance with s. 605.1045, F.S. |
| Please return all con  | respondence concernin                                 | g this matter to:                    |  |
| MICHAEL GEMMELL  |   |                                      |  |
|  | (Contact Person)                                      | <u></u>                              | <u>.</u>   |
| 2010 SOLUTIONS IN  | С   |                                      |  |
|  | (Firm/Company)  |                                      | -  |
| PO BOX 372237  |   |                                      |  |
|  | (Address)   | <u> </u>                             | -  |
| SATELLITE BEACH F  | FI 32937  |                                      |  |
|  | (City, State and Zip Code)                            |                                      | -  |
| mikege2010@msn.co  | •   |                                      |  |
|  | be used for future annual re                          | nort notifications)                  | -  |
| ·  |   | •                                    |  |
| For further informat   | ion concerning this ma                                | tter, please call:                   |  |
| MICHAEL GEMMELL  |   | _at ( 321                            | 773-9516   |
| (Name of Cont  | act Person)   | (Area Code)                          | (Daytime Telephone Number)   |
|  | for the following amount a bank located in the        | •                                    | processed by this office must be payable in US   |
| ☐ \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | □\$155.00 Filing Fees<br>and Certificate of<br>Status | □\$180,00 Filing land Certified Copy |  |
| Mailing Add<br>New Filing S<br>Division of O<br>P.O. Box 63.                               | Section<br>Corporations                               | ]                                    | Street Address: New Filing Section Division of Corporations The Centre of Tallahassee  |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

### Articles of Conversion For

# "Other Business Entity"

nto

### 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 Article DENISE A MAXWELL REAL ESTATE INC P22.000947377  | s of Conversion is:            |
|---|--------------------------------|
| (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   |                                |
| (Enter state, or if a non-U.S. entity, the  | name of the country)           |
| 06/08/2022<br>on  | 72% P. T.                      |
| (date of organization, formation or incorporation)  |                                |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Artic   | les of Organization:           |
| DENISE A MAXWELL REAL ESTATE LLC  | FOR PR                         |
| (Enter Name of Florida Limited Liability Company)   | 70                             |
| 4. If not effective on the date of filing, enter the effective date:  (The effective date of filing) and the effective date.  | 36                             |
| (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 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 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 this 1st day of  | AUGUST 2022                       | 20   |                       |
|---|-----------------------------------|--|-----------------------|
| Signature of Authorized Re  |                                   |  |                       |
| Signature of Authorized Repr<br>Printed Name: MICHAEL GEMI                            | resentative: / R/J<br>MELL        | Title: INCORPORATOR  | -                     |
| 2 10  | 1                                 | See below for required signature(s)]                           |                       |
| Signature: MICHAEL S GE   | MMELL                             | Title: INCORPORATOR  | -<br>-                |
|   |                                   | _ Title:   | <u>-</u><br>-         |
| Signature:Printed Name:   |                                   | Title:   | -<br>-                |
| Signature:Printed Name:   |                                   | Title:   | . 203                 |
| Signature:Printed Name:   |                                   | Title:   | 2022 AUG -5 TALLAHASS |
| Signature:Printed Name:   |                                   | Title:   | 5 PH 12: 36           |
| If Florida Corporation: Signature of Chairman, Vice C If Directors or Officers have n |                                   |  | 2: 36<br>LORID        |
| If Florida General Partnersh<br>Signature of one General Partn                        |                                   | ty Partnership:  |                       |
| If Florida Limited Partnersh<br>Signatures of <u>ALL</u> General Pa                   | ip or Limited Liabilit<br>rtners. | ty Limited Partnership:  |                       |
| All others: Signature of an authorized per  | son.                              |  |                       |
| Fees:   |                                   |  |                       |
| Articles of Conversion Fees for Florida Artic Certified Copy: Certificate of Status:  |                                   | \$25.00<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) |                       |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:  |   |
|--|---|
| DENISE A MAXWELL REAL ESTATE LLC   |   |
| (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:  |
| 7763 LOREN COVE DR   | 7763 LOREN COVE DR                                      |
| MELBOURNE FL 32940   | MELBOURNE FL 32940                                      |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) | ed Agent. You must designate an individual openather of |
| The name and the Florida street address of the reg   | gistered agent are:                                     |
| 2010 SOLUTIONS INC   |   |
| Name   | RIDE  |
| 565-C JACKSON AVENUE   |   |
| Florida street address (P.O. 1   | Box NOT acceptable)                                     |
| SATELLITE BEACH  | FL 32937  |
| 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)

| <u>Title:</u> "AMBR" = Authorized Member             | Name and Address:                 |  |
|--|-----------------------------------|--|
| "MGR" = Manager                                      |                                   |  |
| MGRM   | DENISA A MAXWELL                  |  |
|  | 7763 LOREN COVE DR                |  |
|  | MELBOURNE FL 32940                | <del></del>                                    |
|  |                                   |  |
|  |                                   |  |
|  |                                   |  |
| <del></del>  |                                   | 28   |
|  |                                   | <b>2</b> 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |
|  |                                   |  |
| <del></del>  |                                   | <u> </u>                                       |
|  |                                   | - Fig.   |
| (Use attachment if necessary)                        |                                   | ALL MASSEE FLORING                             |
| rnw ou   |                                   | <u> </u>                                       |
| LE V: Other provisions, if any. D ALL LEGAL BUSINESS |                                   |  |
|  |                                   |  |
| REQUIRED SIGNATURE:                                  |                                   |  |
| MI   | If ill                            | 8/1/20:  |
|  | <del></del>                       |  |
| Signature of a member or                             | an authorized representative of a | member<br>utes. I am aware that                |

ARTICLE IV-

MICHAEL S GEMMELL

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)

Typed or printed name of signee