422000370527

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
. (Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	1kp vi



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08/15/22--01880--087 **150.00

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COVER LETTER

Division of C				
SUBJECT: Willowsto	one Consulting LLC			
30b3EC1		sulting Florida Lim	ted Con	npany)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
Margaret Pisarczyk				
	(Contact Person)		_	
Willowstone Consulting	g LLC			
	(Firm/Company)		-	
580 El Camino Real, u	nit 3502			
·····	(Address)			
Naples, FL 34119				
	City, State and Zip Code)	<u> </u>	_	
gretapisarczyk@gmail	.com			
E-mail Address: (to b	e used for future annual re	port notifications)	_	
For further informati	on concerning this ma	tter, please call:		
Margaret Pisarczyk		_at (²⁴⁸	705-6	8662
(Name of Conta	act Person)	(Area Code) (Day	rtime Telephone Number)
	for the following amou a bank located in the		process	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add				t Address:
New Filing S				Filing Section ion of Corporations
Division of C P.O. Box 632				Centre of Tallahassee
Tallahassee,				N. Monroe Street, Suite 810
			Tallal	hassee, 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 C Willowstone Consulting LLC	Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Limited Liability Corporation	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law o	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	of the country)
05/20/2021 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of	f Organization:
Willowstone Consulting 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 cale 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 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 right which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	nts the amount to FILE IN 18 10 PM 1: 10

,	,			
Signed this 9th	day of August	20 22		
Signature of Autho	orized Representative o	of Limited Liability Company:		
		margant (Pro)		
Signature of Author	nzed Representative: //	Title: Member		
Printed Name: Marya	aret Pisarczyk	Title, Member	-	
Signature(s) on beh	nalf of Other Business En	ntity: See below for required signature(s)		
Signature: Ma	and Post	·	_	
Printed Name: Marga	aret Pisarczyk	Title: Member	_	
Signature:			_	
Printed Name:		Title:	_	
Signature:			_	
Printed Name:		Title:		
Ci				
Drinted Name:		Title:	_	
Timed Name.			20	
Signature:			-الاراد چ -	-
Printed Name:	·· ··	Title:	- ZZZ - E	
6.			2022 AUG 15 PM	1
Signature:		Title:	- 55.	17
Filmed Name		1100.	- C	ŗ
If Florida Corpora	tion:			-
Signature of Chairm	nan, Vice Chairman, Direc	ctor, or Officer.	型: 一	
If Directors or Offic	ers have not been selected	d, an Incorporator must sign.	000)
	n. 4	Liebilita Doutnombios		
Signature of one Ge	Partnership or Limited	Liability rartnership:		
Signature of one Ge	merai Farmer.			
If Florida Limited	Partnership or Limited	Liability Limited Partnership:		
Signatures of ALL				

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

All others:

Fees:

Signature of an authorized person.

Certified Copy:

Articles of Conversion:

Certificate of Status:

Fees for Florida Articles of Organization:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Willowstone Consulting LLC		
(Must contain the words "Limit	d Liability Company, "L.L.C.," or "L.L.C.")	
ARTICLE II - Address:		
The mailing address and street address of	f the principal office of the Limited Liability Company	y is:
Principal Office Address:	Mailing Address:	
580 El Camino Real	580 El Camino Real	
unit 3502	unit 3502	
Naples, FL 34119	Newloo FL24440	
ADTICLE III Desistand Agent Do	Naples, Fl 34119 ristered Office, & Registered Agent's Signature:	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:	
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ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address Margaret Pisarczyk 580 El Camino Real,	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:	i [
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address Margaret Pisarczyk 580 El Camino Real,	ristered Office, & Registered Agent's Signature: win Registered Agent. You must designate an individual of another of the registered agent are: Name Unit 3502	

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)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
Member	Margaret Pisarczyk
	580 El Camino Real, unit 3502 Naples, FL 34119
	Napies, FL 34119
	
	A P
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Margait	

Typed or printed name of signee

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.

Margaret Pisarczyk

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)