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

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2415 N. Monroe Street, Suite 810

Tallahassec, FL 32303

Tallahassee, FL 32314

Articles of Conversion

For

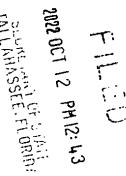
"Other Business Entity"

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.

Wisdom Esoteri	f the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
	(Enter Name of Other Business Entity)
2. The "Other (Er	Business Entity" is a ter 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)
February 5, 2	2014
(date of organ	ization, formation or incorporation)
3. The name o	f the Florida Limited Liability Company as set forth in the attached Articles of Organization:
-,,,	(Enter Name of Florida Limited Liability Company)
4. If not effect (The effective the date this d	ive on the date of filing, enter the effective date: date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after



Signed this 15th day of August	20 <u>22</u>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:	
Printed Name: Mathew Wisdom	Title: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: At M	
Printed Name: Mathew Wisdom	Title: Manager
Signature:	
Signature: Printed Name:	Title:
Signature:	Til
Printed Name:	title:
Signature:	
Printed Name:	Title:
6:	
Signature:Printed Name:	Title
The state of the s	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 In	
tem-da-ci in in in it is a second	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
and the control of th	
If Florida Limited Partnership or Limited Liabili	ty 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:	\$23.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

PILITION TALLATIASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	y is:	
Wisdom Esoterica LLC		
(Must contain the words "Limited Li	ability Company, "I.A.C." or "Lt C.	.")
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Lie	nited Liebilian Comment
	- principal office of the Life	inted Clability Company is:
Principal Office Address:	Mailing Address:	
1700 N Monroe Suite 11 #294	1700 N Montoe Suite 1	1 5794
Tallahassee, FI 32303	Tallahassee, Fl 32303	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida extent address of the cannot be contacted as a contact address of the cannot be contacted as a contact address of the cannot be contacted as a contact address of the cannot be contacted as a contact address of the cannot be contacted as a contact address of the cannot be contacted as a contact address of the cannot be contacted as a contact and contact a	egistered Agent. You must designate	an individual or another
The name and the Florida street address of the	ne registered agent are:	
United States Corporation	Agents, Inc.	
Na	ime	•
5575 S. Semoran Bivd.Suit	e 36	
	O. Box NOT acceptable)	•
Orlando	CI 32822	
City	Zip	
Having heen named as maintened		
Having been named as registered agent and liability company at the place designated registered upon and agree to get in this agent.	I to accept service of process	s for the above stated limited
Bioici ca agein and agree to act in this con	MCIN' / Nirihar down to com	بياض والمساهدين والمساهدين والمساهدين
The proper and comme	IP DETIOTHOUSE SI WIL dution	and I am family the
accept the obligations of my position as	registered agent as provided	for in Chapter 605, F.S.
Cheyenne M	Moseley, Asst.	
Registered Agent's S	ignature (REQUIRED)	Corporation Agents, Inc
	,	2028 TA
(CONT)	INUED)	2022 OCT 12 PM 12:
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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	Mathew Wisdom	
		-
		20 22
		Pri C
(Use attachment if necessary)		12 ASSE
		PH 12: 44 CF STATE E. FT ORIG
ARTICLE V: Other provisions, if any.		100 No.
REQUIRED SIGNATURE:	1 , 10/1	
ROYOTAED 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.

Mathew Wisdom

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)