# 12000469397

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	dress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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### Articles of Conversion

For

### "Other Business Entity"

Into

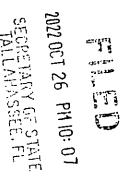
## Florida Limited Liability Company

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:  Business Management & Support Services LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
8/24/22
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Business Management & Support 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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SECRETARY OF STATE

Signed this 20th day of October	20_22
Signature of Authorized Representative of Limit	
Signature of Authorized Representative:	Title: Manager
Signature(s) on behalf of Other Business Entity: [	266 Delow for reduired signature (1971
Simouro Marig. Brucker	
Signature: Marie J Bruckenthal  Printed Name: Marie J Bruckenthal	Title: Manager
Signature:Printed Name:	Title
Printed Name:	_ file.
Signature:	
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Title
Printed Name:	Title.
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Printed Name:	
If Florida Corporation:	
Signature of Chairman Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
and the second s	ty Partnershin:
If Florida General Partnership or Limited Liability Signature of one General Partner.	CV Tattiersing.
-	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
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)



# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KITCLES OF ORGANIZATION FO	K PEZIKIDA ERAT PED EMAL	
ARTICLE I - Name: The name of the Limited Liability Compa	ny is:	
Business Management & Support Services L		
(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	d Liability Company is:
Principal Office Address:	Mailing Address:	
1370 Centre Court Ridge Drive K-301	1370 Centre Court Ridge D K-302	rive
Reunion, FL 34747	Reunion, FL 34747	
The name and the Florida street address o	f the registered agent are:	
David F Bruckenthal		
	Name	
1370 Centre Court Ridg	e Drive, K-302	
Florida street address	s (P.O. Box NOT acceptable)	
Reunion	FL <sup>34747</sup>	
City	Zip	
Having been named as registered agent liability company at the place designe registered agent and agree to act in this statutes relating to the proper and compacted the obligations of my position.  Registered Agent	ited in this certificate, I hereby acc capacity. I further agree to compl plete performance of my duties, an	cept the appointment as wwith the provisions of all ed I am familiar with and
(COI	NTINUED)	ZOZZ OCT 26 PH II SECRETARY OF S

ARTICLE IV-

Marie J Bruckenthal

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Marie J Bruckenthal	
<del></del>	1370 Centre Court Ridge Drive, K-302	
	Reunion, FL 34747	
MGR	David F Bruckenthal	
	1370 Centre Court Ridge Drive, K-302	
	Reunion, FL 34747	
(Use attachment if necessary)		
(Ose attachment if necessary)		
CLE V: Other provisions, if any.		
DECHIDED SIGNATURE.		
REQUIRED SIGNATURE:		
Marie J. Bruce	cheate	
C' 4 C b		
	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware t	
any false information submitted in a docum	nent to the Department of State constitutes a third degree fel	
as provided for in s.817.155, F.S.		

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)

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