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(Re	questor's Name)	
	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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S. CHATHAM

22 NOV 21 PH 1: 36

2022 NOV 21 PM 2: 17

TALLAHASSEE, FLUMB

RECEIVED

COVER LETTER

TO: New Filing Section Division of Corporation	ons	
•		
SUBJECT: brycehallbiz LLC	(Name of Resulting Florida Lin	imited Company)
The analogod Articles of Con		zation, and fees are submitted to convert an "Othe
		any" in accordance with s. 605.1045, F.S.
Please return all corresponder	nce concerning this matter to	o:
John Moore, Senior Paralegal		
(Conta	et Person)	
Dunlap, Bennett, & Ludwig		
(Firm/0	Company)	
8300 Boone Blvd, Suite 250		
(Ac	ldress)	
Vienna, VA 22182		
(City, State	and Zip Code)	
jmoore@dbllawyers.com		
E-mail Address: (to be used for	future annual report notifications)	<u>s)</u>
For further information conce	eming this matter, please call	11:
John Moore	at (⁷⁰³	722-0728
(Name of Contact Person)		ode) (Daytime Telephone Number)
Enclosed is a check for the fordollars and drawn on a bank		cs processed by this office must be payable in US)
Č	00 Filing Fees	=
Mailing Address: New Filing Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	11/21/2022	a: DW
	(4.1 - 2-	Acc#I20160000072	41: () = V
Name:	brycehallbiz	LLC	
Document #:			
Order #:	14644022		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certified: Plain: COGS:		
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount:	\$ 180.00	

Thank you!

SECRETARY OF STATE DIVISION OF CORPORATION 22 NOV 2 | PM 1: 36

Articles of Conversion For "Other Business Entity" Into 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 Articles of Conversion is: brycehallbiz LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of State of Maryland, USA (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
August 14, 2018
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
brycehallbiz 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.

Signed this 21st day of November	_ 20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: /s	/Bryce Hall
Printed Name: Bryce Hall	Title: Managing Wember
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: /s/Bryce Hall	
Printed Name: Bryce Hall	Title: Managing Member
Signature:	
Printed Name:	Title:
Simulation.	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title
Frinted Name.	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

SECRETARY OF STATE OF CORPORATION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	ıy ıs:	
brycehallbiz LLC	The company of the co	
(Must contain the words "Limited Li	liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	he principal office of the Limited Liability Com	pany is:
Principal Office Address:	Mailing Address:	
7265 SE Cricket Court	7265 SE Cricket Court	
Stuart, FL 34997	Stuart, FL 34997	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own I business entity with an active Florida registration.) The name and the Florida street address of the server as the	tered Office, & Registered Agent's Signature Registered Agent. You must designate an individual or another the registered agent are:	NAIG
CT Corporation System		음代드
٨	Name	RPOF S
1200 South Pine Island R		TATE TATE
Florida street address ((P.O. Box <u>NOT</u> acceptable)	SMO!
Plantation	FL 33324	
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)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	David Hell	
Managing Member	Bryce Hall	
	7265 Cricket Court	
	Stuart, FL 34997	
		_ _
		
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		22 NOV 21
(Use attachment if necessary)		종
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		12
LE V: Other provisions, if any.		~** o
<u></u>		<u> </u>
		- t
		4,4
REQUIRED SIGNATURE:		
/s/Bryce Hall		
This document is executed in accordance any false information submitted in a document.	r an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I ument to the Department of State constitutes a third	am aware that
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)