(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600393427406

S. CHATHAM

22 NOV 28 AM II: 06

RECEIVED

COVER LETTER

TO:	New Filing S Division of C				
	ы	d To Have Options, LLC			
SUBJ	ECT:		sulting Florida Li	mited Co	тралу)
					nd fees are submitted to convert an "Other accordance with s. 605,1045, F.S.
Please	return all con	respondence concernin	g this matter to	0:	
Amy (Brown				
		(Contact Person)		_	
Katz	Feller ——————————————————————————————————	(T) (C)			
255	FIRE 04 04 04	(Firm/Company)			
255 E	Fifth St Ste 240	···		_	
		(Address)			
Cincir	nati OH 45202				
•	•	City, State and Zip Code)			
	m@katzteiler.co				
E-n	nail Address: (to I	be used for future annual re	port notifications	s)	
For fu	rther informati	ion concerning this ma	tter, please cal	1:	
Ату і	3rown		at (513	_\ 721-	4532
	(Name of Contr	act Person)		de) (Day	rtime Telephone Number)
Enclo dollar	sed is a check to s and drawn on	for the following amou a a bank located in the	int: (All checks United States)	s proces	sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles mization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Fili and Certified C	-	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee.	ection Corporations 27		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monne Street, Suite 810

Tallahassee, FL 32303



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: I20000000088

Date: November 28, 2022	ACCOUNT#. 12000000000
Name: James Brodbeck	
Reference #:	
Entity Name: IT'S GOOD TO HAVE OPTIONS, LLC	<u>c</u>
Articles of Incorporation/Authorization to Transact Busine	ess
Amendment	
Change of Agent	
Reinstatement	
✓ Conversion	
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitous Name	
Other	
Authorized Amount: \$150.00	
Signature:	

+1.212.947.7200

+44 (0)20.3786,1090

DIVISION OF COMPORATION 22 NOV 28 AM II: 06

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.

 The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: It's Good To Have Options Inc.
(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)
03/05/2021 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
It's Good To Have Options, 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 locument'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 11 day of November	20_22
Signature of Authorized Representative of Limit	ed Liability Company;
Signature of Authorized Representative: Printed Name: Howard Cooper	Title: Manager
Signature(a) on behalf of Other Business Entity: [5	See below for required signature(s)]
Signature:	mid Persident
Printed Name: Howard Geoper	Title: President
Signature:	
Printed Name:	_ Title:
2.	
Signature:Printed Name:	Title:
Fillined (Ashle	
Signature:	
Printed Name:	_ Title:
Si	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or C	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	v <u>Limited Partnershin:</u>
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)

DIVISION OF COMPORATION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: It's Good To Have Options, LLC (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 Liability Company Principal Office Address: Mailing Address: 4873 NW 59th Ct Coconut Creek FL 33073	y is:
(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 Liability Company Principal Office Address: Mailing Address: 4873 NW 59th Ct 4873 NW 59th Ct	y is:
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The mailing address and street address of the principal office of the Limited Liability Company Principal Office Address: Mailing Address: 4873 NW 59th Ct 4873 NW 59th Ct	y is:
Principal Office Address: 4873 NW 59th Ct 4873 NW 59th Ct	y is:
4873 NW 59th Ct 4873 NW 59th Ct	
Coconut Creek FL 33073 Coconut Creek FL 33073	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	SECRE BIVISION G
Cogency Global Inc.	O 기원도 O 기원도
Name 115 North Calhoun St Ste 4 Florida street address (P.O. Box NOT acceptable)	
115 North Calhoun St Ste 4	
Florida street address (P.O. Box NOT acceptable)	₹
Tallahassee FL 32301	٠,,٠
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)

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR — Manager	Howard Cooper
	4873 NW 59th Ct
	Coconut Creek FL 33073
MGR	James Phelps
MGR	4873 NW 59th Ct
	Coconut Creek FL 33073
	Cocciliat Clock FE 33073
	
	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member	or an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member This document is executed in accords any false information submitted in a d	or an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes. I am aware occument to the Department of State constitutes a third degree fe
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member This document is executed in accords	since with section 605 0203 (1) (b). Floride Statutes, I am assess

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-