122000500633

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

Office Use Only



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COVER LETTER

TO: New Filing S Division of C					
SUBJECT: Control C	•				
SUBJECT:	(Name of Res	sulting Flo	orida Limite	ed 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 m	atter to:		
Sharon F. Danzger					
-	(Contact Person)				
Control Chaos, LLC					
	(Firm/Company)				
6205 Celadon Circle					
	(Address)				
Palm Beach Gardens,	FL 33418				
	City, State and Zip Code)				
Sharon@ControlChao	· ·				
	be used for future annual re	port notif	ications)		
		•			
For further informati	on concerning this ma	tter, ple	ase call:		
Sharon Danzger		at (²⁰	1 ,	321-4	1425
(Name of Conta	act Person)			(Day	time Telephone Number)
	or the following amou a bank located in the			rocess	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		0.00 Filing I rtified Copy		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Add	ress:		5	Street	Address:
New Filing S	ection		ì	New I	Filing Section
Division of C	•				on of Corporations
P.O. Box 632	. /			The C	lentre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

2022 10 FT 9: 13

November 4, 2022

SHARON F. DANZGER 6205 CELADON CIR PALM BEACH GARDENS, FL 33418

SUBJECT: CONTROL CHAOS, LLC

Ref. Number: W22000139273

We have received your document for CONTROL CHAOS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by an authorized person.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 022A00024799

Don't CO at DO DON good mail 1 and 1 and 1

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.

. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Control Chaos, 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.	
	C.)
First organized, formed or incorporated under the laws of NJ (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)	
May 2, 2006	
(date of organization, formation or incorporation)	
. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization	:
Control Chaos, LLC	
(Enter Name of Florida Limited Liability Company)	
Date of Filing 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 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.) Sote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ocument's effective date on the Department of State's records.	r
. The plan of conversion has been approved in accordance with all applicable statutes.	
b. 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.)
2022 ROV 3	

Signed this 20 day of September	20 <u></u>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:	Title: Owner
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Share 7 Ar	_
Signature: Sharo F Dantger Printed Name: Sharo F Dantger	Title: OWNE!
Signature:	<u> </u>
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	Title
Signature:Printed Name:	431.4
Printed Name:	Title:
Signature:	
Signature:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In	corporator must sign.
	-
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:
agnature of one General Farther.	
lf 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:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liabi	, ep,	
Control Chaos, LLC		
(Must contain the w	ords "Limited Lial	oility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:		
The mailing address and street	address of the	principal office of the Limited Liability Company is
Principal Office Address:		Mailing Address:
6205 Celadon Circle		6205 Celadon Circle
Palm Beach Gardens, FL 33418 ARTICLE III - Registered A	gent Register	Palm Beach Gardens, FL 33418 red Office & Registered Agent's Signature
ARTICLE III - Registered A The Limited Liability Company cannot s business entity with an active Florida re	serve as its own Registration.)	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another
ARTICLE III - Registered A The Limited Liability Company cannot s business entity with an active Florida re	serve as its own Registration.) t address of th	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another
ARTICLE III - Registered A The Limited Liability Company cannot s business entity with an active Florida re The name and the Florida stree	serve as its own Registration.) t address of the anzger	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another
ARTICLE III - Registered A The Limited Liability Company cannot s business entity with an active Florida re The name and the Florida stree	serve as its own Registration.) t address of the anzger Na	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another re registered agent are:
ARTICLE III - Registered A The Limited Liability Company cannot s business entity with an active Florida re The name and the Florida stree Sharon F. D	serve as its own Registration.) t address of the anzger Note the properties of the	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another re registered agent are:
ARTICLE III - Registered A The Limited Liability Company cannot s business entity with an active Florida re The name and the Florida stree Sharon F. D	serve as its own Registration.) t address of the anzger Note that the properties of the properties of the rect address (Properties of the Registration.)	red Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another the registered agent are:

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>Fitte:</u> 'AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	
AMBR	Sharon Danzger
	6205 Celadon Circle
	Palm Beach Gardens, FL 33418
	
	. = .
Use attachment if necessary)	1.
	: r
LE V: Other provisions, if any,	
NEW AND LESS AND ADMINISTRATION OF THE STREET	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	7 Dans
REQUIRED SIGNATURE:Skace	27 Dang
Shaw	an authorized representative of a member
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am awa
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am awament to the Department of State constitutes a third degree
Signature of a member or This document is executed in accordance any false information submitted in a document	with section 605.0203 (1) (b). Florida Statutes, I am awa
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Sharon F. Danzger	with section 605.0203 (1) (b). Florida Statutes, I am awa