L22000519721

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

Office Use Only



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SECRETARY OF STATE

22 DEC -1 AM 1:

COVER LETTER

TO: New Filing Section Division of Corporation	nS		
•	Gerardo & Coberly CPAs LLC		
SUBJECT: Rosen, Weissman,	(Name of Resulting Florida Limit	ted Company)	-
The enclosed Articles of Conve Business Entity" into a "Florida			
Please return all correspondence	e concerning this matter to:		
Justin Rosen			
(Contact	Person)	-	
Rosen, Weissman, Gerardo & Co	berly CPAs LLC		
(Firm/Co	mpany)	_	7
3709 Jetton Ave. Suite 203			7 22 (SEC
(Add	ress)	-	DEC DEC CREI
Tampa, FL 33629			SS AR - □
(City, State a	nd Zip Code)	_	rea ≥ [
justin@southtampacpa.com			
E-mail Address: (to be used for fu	iture annual report notifications)	_	C-1 AM 1: 35 TARY OF STATE ASSEE, FLORID
For further information concern	ning this matter, please call:		
Michael J. Faehner	at (⁷²⁷)306-0201	
(Name of Contact Person)		(Daytime Telephone Number)	-
Enclosed is a check for the foll dollars and drawn on a bank lo		processed by this office must b	e payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	O Filing Fees		
Mailing Address: New Filing Section Division of Corporation P.O. Boy 6327	18	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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: Justin Rosen F.D.S. 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)
January 1, 2012
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Rosen, Weissman, Gerardo & Coberly CPAs 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 effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
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.

Supplas

Signed this 8 day of Norse Level	100 co		
Signature of Authorized Representative of Limit			
Signature of Authorized Representative: Printed Name: Justin Rosen	of Dan	_	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)		
Signature: Printed Name: Justin Rosen		-	
Printed Name: Justin Rosen	Title: President	-	
Signature:Printed Name:	TV.)	_	
Printed Name:	_ little:	-	
Signature:Printed Name:	Title	-	
Printed Name:	1ttle;	-	
Signature:Printed Name:	Title:	-	
rimed Name.		-	
Signature:Printed Name:	Title	-	
Signature: Printed Name:	Title	-	
		-	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		22 E SECR TALLA	_
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	EC-1 ETARY HASSEE	F
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	AM 1:35 OF STATE FLORIE	L U
All others: Signature of an authorized person.		35 35	
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)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	npany is:
Rosen, Weissman, Gerardo & Coberly CP.	As LLC
(Must contain the words "Limi	ited Liability Company, "L.L.C.," or "LLC,")
ARTICLE II - Address: The mailing address and street address Principal Office Address:	of the principal office of the Limited Liability Company is: Mailing Address:
3709 Jetton Ave.	3709 Jetton Ave.
Suite 203	Suite 203
Tampa, FL 33629	Tampa, FL 33629
Suite 203	Suite 203

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:

Justin Rosen		_
	Name	22 SEI
3709 Jetton Ave., Sui	te 203	AHE R
Florida street addre	ess (P.O. Box NOT acceptable)	IAR ASS
Tampa	FL ³³⁶²⁹	
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)

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Justin Rosen	
	3709 Jetton Ave. Suite 203	
	Tampa, FL 33629	
		
		
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(Use attachment if necessary)	A S	. ₹.
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CLE V: Other provisions, if any.	<u> </u>	<u> </u>
	<u>~</u>	<u> </u>
	<u></u>	<u> </u>
REQUIRED SIGNATURE:		
MINT	N MOVV	
Signature of a member or a	an authorized representative of a member	
	with section 605.0203 (1) (b), Florida Statutes. I am awa	are that
any false information submitted in a docum	nent to the Department of State constitutes a third degree	e felony
as provided for in s.817.155, F.S.		
ac provided to the distribution of the		
·		
Justin Rosen	ped or printed name of signee	

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