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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

2023 JTT -3 PH 4: 43

December 19, 2022

WILLIAM B. NOLAN 3034 THE OAKS

MIRAMAR BEACH, FL 32550-

SUBJECT: MAVERI CONSULTING LLC

Ref. Number: W22000156091

> mo the name is all one work

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

We have received your document for, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$155.00.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Karen Lovelace Regulatory Specialist II

Letter Number: 722A00028214

AN -3 AM 1:31

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 mayer (consulting LLC | the filing of the Articles of Conversion is: |
|--|---|
| (Enter Name of Other Business Entity) | |
| 2. The "Other Business Entity" is a | anaral partnership gamman law or husing a law a |
| First organized, formed or incorporated under the laws of(Enter state, | |
| on 9/09/2016 (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as set forth | —————————————————————————————————————— |
| Mavericonsulfing LLC (Enter Name of Florida Limited Liability Compan | |
| (Enter Name of Florida Limited Liability Compan | у) |
| 4. If not effective on the date of filing, enter the effective date: | 2/8/2023 |
| the date this document is filed by the Florida Department of S | tate.) |
| Note: If the date inserted in this block does not meet the applicable statutory fil document's effective date on the Department of State's records. | ing requirements, this date will not be listed as the |
| 5. The plan of conversion has been approved in accordance with al | l applicable statutes. |
| The "Converted or Other Business Entity" has agreed to pay any m which such members are entitled under ss. 605.1006 and 605.1061 | nembers having appraisal rights the amount to -605.1072, F.S. |
| | 2023 JAN -3 SECRETAR TALLARY |

| Signed this 8th day of December | _20 <u>_23</u> | | |
|---|--|--------------|---|
| Signature of Authorized Representative of Limi | ited Liability Company: | | |
| Signature of Authorized Representative: William Brudford No lan | m. Fract. Molen_ Title CED | - | |
| Signature(s) on behalf of Other Business Entity: | See below for required signature(s) | | |
| Signature: William Bradford Noles | Title: CED | - | |
| • | | | |
| Signature:Printed Name: | Title: | - | |
| | | | |
| Signature:Printed Name: | Title: | _ | |
| | | | |
| Signature:Printed Name: | 71.1 | _ | |
| Printed Name: | 1 itle: | _ | |
| Signature: | | | |
| Printed Name: | Title: | _ | |
| Signature: | | | |
| Printed Name: | Title: | _ | |
| If Florida Corporation: | | | |
| Signature of Chairman, Vice Chairman, Director, or | Officer. | | |
| If Directors or Officers have not been selected, an Inc | | | |
| <u>If Florida</u> General Partnership or Limited Liabili | ty Partnarchin | | |
| Signature of one General Partner. | ty tarthersmp. | | |
| | | | |
| <u>If Florida Limited Partnership or Limited Liabilit</u> Signatures of <u>ALL</u> General Partners. | ty Limited Partnership: | | |
| All others: Signature of an authorized person. | | | |
| Fees: | | 71. 038 | 1 |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) | RETARY OF | |

R3 JAN -3 AM 1:32 ECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | |
|--|--|--|
| The name of the Limited Liability Company is: | | |
| | | |
| Mayeri Consulting LLC (Must contain the words "Limited Liability | C | |
| (Must contain the words "Limited Liability | Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - Address: | | |
| The mailing address and street address of the prin | ncinal office of the Limited | Liability Company in |
| φ | merpar office of the Emilion | Clability Company is. |
| Principal Office Address: | Mailing Address: | |
| 3034 The Dabs | / a a | |
| 3034 The Daks miramar Beach, FL 32550 | _ same | |
| | | |
| ADTICLE HE D. C. L. D. C. L. | | - |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register | Office, & Registered Ager | it's Signature: |
| business entity with an active Florida registration.) | To a man designate un m | arvidual of another |
| The name and the Florida street address of the reg | gistered agent are: | |
| | | |
| William Bradfo Name | rd Nolan | |
| | | |
| 3034 The Oak | <u>S</u> | |
| Florida street address (P.O. I | Box NOT acceptable) | |
| Minamor Beach | EI 22 (47) | |
| Miramar Beach City | <u>rt シンシン</u> 7in | |
| | • | |
| Having been named as registered agent and to a | accept service of process for | the above stated limited |
| liability company at the place designated in the | his certificate, I hereby acce | ot the appointment as |
| registered agent and agree to act in this capacity statutes relating to the proper and complete per | . I juriner agree to comply rformance of my duties, and | with the provisions of al |
| accept the obligations of my position as regis | tered agent as provided for | i um jamiliar wiin ana in Chanter 605 F.S |
| | g Producting | c |
| Sil Sead VI | | s 2 |
| Registered Agent's Signat | Oure (REQUIRED) | 023 TA |
| Topinored Quent's Signat | are (REQUIRED) | JAN TAN |
| | | 3 |
| (CONTINUI | ED) | CO PERSON |
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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 | William Bradford Nolan 3034 The Oaks Miranar Beach, FL 32550 |
| | |
| | |
| | |
| (Use attachment if necessary) | |
| RTICLE V: Other provisions, if any. | |
| REQUIRED SIGNATURE: | 1.1 |
| Signature of a member or a This document is executed in accordance vany false information submitted in a document as provided for in \$ 817 155 F.S. | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that the degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes a third degree felongement to the Department of State constitutes at third degree felongement to the Department of State constitutes at third degree felongement to the Department of State constitutes at third degree felongement to the Department of State constitutes at the Depar |
| - William Bra | dford Nolan |
| | ed or printed name of signee Filing Fees |
| \$125.00 Filing Fee for Articles of \$ 30.00 Certified Copy (Optional | Organization and Designation of Registered: A gent |



December 29, 2022

Florida Department of State
Division of Corporations
The Center of Tallahassee
2415 N. Monroe Street, Suite 180
Tallahassee, FL 32303

Dear Sirs,

Please correct my company name as Mavericonsulting LLC which is one word with no spaces until the space just before LLC

Sincerely yours,

Wm. Brad, Nolan

Who Ged Molan

2023 JAN -3 AM 1: 32 SECRETARY DE STAT