# L23000010176

(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:	
Special Instructions to Filing Officer:	

Office Use Only



800399361928

2023 JAN -3 AM 8: 40

D. O'KEEFE JAN 10 2023 December 27, 2022

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Matthew Zeoli LLC Conversion

Dear Madam/Sir:

Please find enclosed the following for filing related to the conversion of Matthew Zeoli LLC from a New York entity to a Florida entity:

- Articles of Conversion
- Articles of Organization
- Certificate of Good Standing
- Check in the amount of \$155 (filing fees)

Once converted, Mr. Zeoli will then dissolve "Zeoli LLC" (Document Number: L22000310908), which was erroneously filed in Florida in July 2022. Mr. Zeoli intended to transfer his New York entity to a Florida entity instead of creating a new entity.

If you have any questions or if I can be of any further assistance, please do not hesitate to contact me by phone (678-797-3779) or email (arangeresystams acom). Thank you!

Sincerely,

Arun Gupta

Enclosures

## COVER LETTER

<b>TO:</b> New Filing Section Division of Corporations	
SUBJECT: Matthew Zeoli LLC	
(Na	me of Resulting Florida Limited Company)
	m. Articles of Organization, and fees are submitted to convert an "Other mited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence co	incerning this matter to:
Arun Gupta	
(Contact Perso	on)
Henssler Financial	
(Firm/Compa	<del>y</del> y)
3735 Cherokee Street	
(Address)	
Kennesaw, GA 30144	
(City, State and Zi	p Code)
matthewthomaszeoli@gmait.com	
E-mail Address: (to be used for future	annual report notifications)
For further information concerning	this matter, please call:
Arun Gupta	at (678 ) 697-3779
(Name of Contact Person)	at (678 ) 697-3779  (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located	ng amount: (All checks processed by this office must be payable in US d in the United States)
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ S155.00 Filing and Certificate Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

INHS11 (7/17)

# **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.

Statutes.	Torra Emined Chabling Company in accordance with 3.005.1045. Florida
	ss Entity" immediately prior to the filing of the Articles of Conversion is:
(En	er Name of Other Business Entity)
2. The "Other Business Entity" is	Limited Liability Company e: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example	e: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorpo	rated under the laws of
on	corporation)
3. The name of the Florida Limite	d Liability Company as set forth in the attached Articles of Organization:
Matthew Zeoli LLC	
(Enter Name	of Florida Limited Liability Company)
4. If not effective on the date of fi	ling, enter the effective date:
	rior to date of receipt or filed date nor more than 90 calendar days after
	rest the Florida Department of State.) ses not meet the applicable statutory filing requirements, this date will not be listed as the ment of State's records.
5. The plan of conversion has been	approved in accordance with all applicable statutes.
	s Entity" has agreed to pay any members having appraisal rights the amount to under ss. 605,1006 and 605,1061-605,1072, F.S.
	7823 J
	>: ← ¬

Signed this 19 day of Dec	mhor 20	)_22
Signature of Authorized Represen		
Signature of Authorized Representat Printed Name: Matthew Zeoli	ive: <u>24</u> 7	itle: Sole Member/Manager
Signature(s) on behalf of Other Bus	iness Entity:  See	below for required signature(s)]
Signature: MA-M Printed Name: Anthu 1001:	T	ide: Sue mento/manza
Signature: Printed Name:	Т	itle:
Signature:Printed Name:	Т	itle:
Signature:Printed Name:	т	itle:
Signature: Printed Name:	Т	itle:
Signature: Printed Name:	T	itle:
If Florida Corporation: Signature of Chairman, Vice Chairman If Directors or Officers have not been		
If Florida General Partnership or L. Signature of one General Partner.	imited Liability P	artnership:
If Florida Limited Partnership or L. Signatures of ALL General Partners.	imited Liability L	imited Partnership:
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of C Certified Copy: Certificate of Status:	Organization: \$1 \$3	5.00 25.00 0.00 (Optional) .00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:			
The name of the Limited	Liability Company is:		
Matthew Zeoli LLC			
(Must conta	in the words "Limited Liability Company, "L.E.C.," or "LEC.")		
ARTICLE II - Address			
The mailing address and	street address of the principal office of the Limit	ed Liability Co.	mpany is:
Principal Office Addres	8: <u>Mailing Address:</u>		
1101 Seafarer Circle	1101 Seafarer Circle		
Apt. 303	Apt. 303		
Jupiter, FL, 33477	Jupiter, FL, 33477		
<u>Matth</u>	ew Zeoli  Name  Scotterer Girelo, Apt. 202		
	Seafarer Circle, Apt. 303 ida street address (P.O. Box NOT acceptable)		
Jupite			
	City Zip		
liability company at registered agent and ag statutes relating to the accept the obligatio	registered agent and to accept service of process the place designated in this certificate. I hereby a gree to act in this capacity. I further agree to comper proper and complete performance of my duties, and so my position as registered agent as provided agent as provided.  IAL JM  Legistered Agent's Signature (REQUIRED)	ecept the appoir ply with the prov and I am familia	ntment as visions of all or with and
}	(CONTINUED)		202

2023 JAN - 3 AM 8: 4:

	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR/AMBR	Matthew Zeoli	
	1101 Seafarer Circle, Apt. 303	
	Jupiter, FL 33477	
(Use attachment if necessary)		
(Ose anachment it necessary)		
	<del>.</del> -	
<b>LE V</b> : Other provisions, if any.	• • • • • • • • • • • • • • • • • • •	
ment of the company may vest in one o	r more members	
		<u> </u>
		<del>.;</del>
	·	-
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:		  

#### STATE OF NEW YORK

#### DEPARTMENT OF STATE

#### Certificate of Status

i, ROBERT J. RODRIGUEZ. Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

**Entity Name:** 

MATTHEW ZEOLI LLC

DOS ID Number:

5681420

Entity Type:

DOMESTIC LIMITED LIABILITY COMPANY

**Entity Status:** 

**EXISTING** 

Date of Initial Filing with DOS:

01/03/2020

Statement Status:

CURRENT

Statement Due Date:

01/31/2024

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on November 09, 2022 at 10:51 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Hughan

By Brendan C. Hughes

**Executive Deputy Secretary of State** 

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