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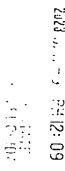
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Emily Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

Division of Corp							
SUBJECT: Absolutely	Organized, LLC						
		ulting Florida Lin	iited Com	pany)			
The enclosed Articles o Business Entity" into a	of Conversion. Articl "Florida Limited Li	es of Organiza ability Compar	tion, and y" in ac	l fees are submitted to c cordance with s. 605.10	onvert)45. F.S	an "Oi S.	ther
Please return all corresp	oondence concerning	this matter to:					
Katherine H. Trezise			_				
	(Contact Person)						
Absolutely Organized, LL	.C		_				
1	(Firm/Company)						
132 Hazelwood Drive							
	(Address)		_				
Ponte Vedra, FL 32081							
	State and Zip Code)		_				
katherine@absolutely-org	ganized.com						
E-mail Address: (to be u		ort notifications)	_				
For further information	concerning this mat	ter, please call:					
Katherine H. Trezise		at (410	913-6	960			
(Name of Contact I	Person)	(Area Code	(Dayt	ime Telephone Number)			
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of Organization)						2028	
Mailing Addres	s:		Street	Address:		(
New Filing Sect	ion		New F.	iling Section		f	
Division of Corp	porations			on of Corporations	•	1.,	
P.O. Box 6327 Tallahassee, FL	32314		_	entre of Tallahassee J. Monroe Street, Suite	81Ö		. '
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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.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Absolutely Organized, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc
First organized, formed or incorporated under the laws of Maryland
(Enter state, or if a non-U.S, entity, the name of the country)
on August 27, 2001
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Absolutely Organized, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: January 1, 2023
(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 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.
요. 22 23

Signed this first day of January 2023	20
Signature of Authorized Representative	of Limited Liability Company:
Signature of Authorized Representative:	Title: member
	Intity: [See below for required signature(s)]
Signature: Kachesine H. Trepse	Title: member
Printed Name: Kainerine H. Trezise 3	Title: member
Signature:	
Printed Name:	Title:
Printed Name:	Title:
Printed Name:	Title:
Printed Name:	Title:
Signature:	Title:
Printed Name:	Ittle:
If Florida Corporation:	
Signature of Chairman. Vice Chairman. Direc	
If Directors or Officers have not been selected	d. an Incorporator must sign.
If Florida General Partnership or Limited	Liability Partnership:
Signature of one General Partner.	Zidomy I di meridapi
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	Liability Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

-9 FHI2: 09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Absolutely Organized, 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 is:
Principal Office Address: Mailing Address:
132 Hazelwood Drive 132 Hazelwood Drive
Ponte Vedra, FL 32081 Ponte Vedra, FL 32081
The name and the Florida street address of the registered agent are: Thomas M. Trezise Name
132 Hazelwood Drive
Florida street address (P.O. Box NOT acceptable)
Ponte Vedra FL 32081
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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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	Katharina II Tanina
AMBR	Katherine H. Trezise 132 Hazelwood Drive
	Ponte Vedra, FL 32081
	Folite Vedia, 1 E 32001
	
	
(Use attachment if necessary)	
(Ose attachment if necessary)	
LE V: Other provisions, if any.	
<u>-</u> .	
DEOLUBED CION TUBE	
REQUIRED SIGNATURE:	
11 -1 -1 -1 -1 -1 -1 -1	
Kathrine H. Legar	
•	n authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b). Florida Statutes, I am aware the
any false information submitted in a docun	nent to the Department of State constitutes a third degree feio
as provided for in s.817.155, F.S.	
Katherine H. Trezise	
Additional Tr. Treelige	
	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)