L23000057754

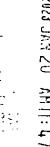
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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09/08/23--01007--001 **150.00



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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees: \$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

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

Tarianassee, TE 52505

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605,0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: FRIENDLY ADJUSTER LLC				
(Name of I	Resulting Florida Lit	nited Con	npany)	
The enclosed Articles of Conversion, Ar Business Entity" into a "Florida Limited				
Please return all correspondence concern	ing this matter to);		
KEVIN J. CONNER, CPA				
(Contact Person)	-			
CONNER & ASSOCIATES LLC				
(Firm/Company)				
20 3RD ST SW STE 306				
. (Address)	•			
WINTER HAVEN, FL 33880				
(City, State and Zip Code	e)			
JCONNER@CONNER-CPA.COM				
E-mail Address: (to be used for future annua	l report notifications)		
For further information concerning this i	natter, please cal	1:		
KEVIN J. CONNER	at (<u></u> 863) 268-	4374	
(Name of Contact Person)	(Area Cod	de) (Day	vtime Telephone Number)	
Enclosed is a check for the following am dollars and drawn on a bank located in the		s proces	sed by this office must be payab	le in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fee and Certificate of Status	s		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	202

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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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: FRIENDLY ADJUSTER 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.)
(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)
01/29/2020 on .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
FRIENDLY ADJUSTER 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 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.

Signed this 315+ day of DECEMBER	2077
Signed this VD197 day of DECEMBER	
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: SETH DICKINSON	Title: MANAGING MEMBER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: 1644	
Printed Name: SETH DICKINSON	Title: MANAGING MEMBER
Signature:	
Signature:Printed Name:	
Signature:	
Signature:Printed Name:	Title:
Signature [,]	
Signature:Printed Name:	Title:
Signature	
Signature:Printed Name:	Title:
Signature	
Signature:Printed Name:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others: Signature of an authorized person.	
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 Company is:	
EDIENDLY AD HISTER LLC	
FRIENDLY ADJUSTER LLC (Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ADTICUT II. Addison	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2347 BRASSIE CT	2347 BRASSIE CT
WINTER HAVEN, FL 33884	WINTER HAVEN, FL 33884
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r SETH DICKINSON	tered Agent. You must designate an individual or another
Namo	2
2347 BRASSIE CT	
Florida street address (P.O	. Box NOT acceptable)
WINTER HAVEN	FL 33884 Zip
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	o accept service of process for the above stated limited in this certificate. I hereby accept the appointment as eity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S
Registered Agent's Sign	nature (REQUIRED)

(CONTINUED)

2023 JAN 20 AKTH: 48

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
AMBR	SETH DICKINSON 2347 BRASSIE CT		
<u></u>			
41			
(Use attachment if necessary)			
CLE V: Other provisions, if any.			
·			

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SETH DICKINSON

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent **s 5.00 Certificate of Status (Optional): JAN 20 AM II: 48 \$ 30.00 Certified Copy (Optional)