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

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COVER LETTER

Division of Corp	orations			
_{SUBJECT:} Repres	sentation & n	narketing	Serv	v., LLC
	(Name of Resu	lting Florida Limite	d Comp	pany)
The enclosed Articles of Business Entity" into a	Conversion, Article Florida Limited Lia	es of Organization bility Company	on, and Tin acc	fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all correspo	ondence concerning	this matter to:		
Registered Agents	Inc			
((Contact Person)			
(1	Firm/Company)			
7901 4th St N STE 3	800			
	(Address)			
St. Petersburg, FL 33	3702			
(City.	. State and Zip Code)			
eastern@registereda	agentsinc.com			
E-mail Address: (to be us	ed for future annual rep	ort notifications)		
For further information of	concerning this matt	er, please call:		
Filings Team (Name of Contact P	Person)	at (<u>307</u>) (Area Code)		0-2803 ime Telephone Number)
Enclosed is a check for t dollars and drawn on a b			ocesse	ed by this office must be payable in US
(\$25 for Conversion an	S155.00 Filing Fees and Certificate of atus	□\$180.00 Filing I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address	<u>s:</u>	•		Address:
New Filing Secti	on	Ì	New F	iling Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, Fl. 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO: New Filing Section

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 Representation & marketing Serv., LLC	s of Conversion is:
(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	
(Enter entity type. Example: corporation, limited partnership, general partnership, common	law or business trust, etc
First organized, formed or incorporated under the laws of	ame of the country)
on 11/02/2012 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Article Representation & marketing Serv., LLC	les of Organization:
(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 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 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 appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S.	I rights the amount to 2023
	./
	#

	Signed this 18th day of January 20 23 .
	Signature of Authorized Representative of Limited Liability Company:
	Signature of Authorized Representative: A Home Printed Name: Jason Hynn Wile: Men Bee
	Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
	Signature: A Alyn Printed Name: Tash Flyn Title: Mena BER
	Signature: Printed Name: Title:
•	Signature:
	Signature: Printed Name: Title:
	Signature: Title:
	Signature: Title: Title:
	If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.
	If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
	If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of <u>ALL</u> General Partners.
	All others: Signature of an authorized person.
	<u>Fees:</u>
	Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (Optional) Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Representation & marketing Serv., LLC (Must contain the words "Limited Liability	v Company, "L.L.C.," or "LLC.")
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:
7901 4th St N STE 300	7901 4th St N STE 300
St. Petersburg FL 33702	St. Petersburg, FL 33702
business entity with an active Florida registration.) The name and the Florida street address of the r Registered Agents Inc	egistered agent are:
Name	
7901 4th St N STE 300	
Florida street address (P.O	
St. Petersburg	_{FL} FL
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 this certificate. I hereby accept the appointment as ity. 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
David Beens	
Registered Agent's Sign	nature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:			
"AMBR" $=$ Authorized Member				
"MGR" = Manager				
AMBR	Jason Flynn 7901 4th St N STE 300			
	St. Petersburg FL 33702			
_				
	2022			
		•		
	:>			
	• •			
(Use attachment if necessary)	:			
ARTICLE V: Other provisions, if any.	r de			
<u> </u>	<u></u>			
<u>REQUIRED</u> SIGNATURE:				
Patting Janey				
Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware the	at		
any false information submitted in a docu	ment to the Department of State constitutes a third degree felo	my		
as provided for in s.817.155, F.S.	·	·		
Robin Jones				
	ped or printed name of signee			
ı y	Filing Fees			
	rang <u>rees</u>			

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