# UZ3000066157

(Red	uestor's Name)	
(Add	lress)	
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(City	/State/Zip/Phone	#)
PICK-UP	MAIT WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	filing Officer:	
	Office Use Only	y



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2023

## **COVER LETTER**

Division of	Section Corporations			
SUBJECT: HSMC,	LLC			
		sulting Florida Lin	nited Co	ompany)
The enclosed Article Business Entity" int	es of Conversion, Artic o a "Florida Limited L	cles of Organiza iability Compar	tion, a ıy" in :	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all cor	respondence concernir	ng this matter to:		
Jeremy N. Wilson				
HSMC, LLC	(Contact Person)	<u> </u>	_	
040414 1 11 7 7	(Firm/Company)	<del></del>	<del>-</del>	
2424 Umbrella Tree D	(Address)		_	
Edgewater, FL 32141	(			
(	City, State and Zip Code)		-	
diatribe101@gmail.co	m			
E-mail Address: (to b	pe used for future annual re	port notifications)	-	
For further informati	on concerning this ma	tter, please call:		
Jeremy N. Wilson		_at ( <u>404</u>	)242-	6501
(Name of Cont	act Person)	(Area Code	) (Day	ytime Telephone Number)
Enclosed is a check to dollars and drawn on	for the following amound a bank located in the	nt: (All checks p United States)	oroces:	sed by this office must be payable in US
\$150.00 Filing Fees \$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add	<del></del>		Stree	t_Address:
New Filing S			New	Filing Section
Division of C				ion of Corporations
P.O. Box 632	/		The C	Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## 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 the fiting of the Articles of Conversion is: HSMC, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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)
06/15/2020
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: HSMC, 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 day of Jan \ o	20 <b>_23</b>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Jeremy N. Wilson	Title: Мападег
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
of Marin Man	
Printed Name: Jeremy N. Wilson	Title: Manager
Signature:	
Printed Name:	Title:
Signature: Printed Name:	
Signature:Printed Name:	Title
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
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

				ANDERT COMPAN
ARTICLE I - Na				
The name of the L	imited Liability Co	mpany is:		
HSMC, LLC				
(M	ust contain the words "Lir	nited Liability Company	, "L.L.C" or "LLC	)
ARTICLE II - A	ddress:			
		s of the principal c	office of the Lir	nited Liability Company
Principal Office A	Address:	<u>Mailir</u>	<u>ig Address:</u>	
2424 Umbrella Tree	Drive	2424 U	Imbrella Tree Dr	ive
Edgewater, FL 3214	11	Edgew	ater, FL 32141	
	<del></del>	<del>_</del>		
ARTICLE III - R	egistored Agent D	agintum d (NEC -	e n	
Tine Limited Liability C	ompany cannot serve as it	own Registered Agent	You must designate	Agent's Signature:
business entity with an	active Florida registration.	)	3	
The name and the	Florida street addres	s of the registered	agent are:	
			_	
	Jeremy N. Wilson	Name		-
		Name		ı
	2424 Umbrella Tree	Drive		_
	Florida street add	ress (P.O. Box <u>NC</u>	OT acceptable)	_
	Edgewater	FL.3	2141	
	City	<del></del>	Zip	-
			<del>-</del>	

is:

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

#### ARTICLE IV-

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

DARATORII A L. L. L. L.	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	A. A
MGR	Jeremy N. Wilson
	2424 Umbrella Drive
	Edgewater, FL 32141
<del></del>	
	:
	<del></del>
	· _
	<del></del> <u></u>
	#:
(Use attachment if necessary)	
(Use attachment if necessary)	
•	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
•	
•	
•	
CLE V: Other provisions, if any.	
•	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lam aware th
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lam aware th
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.  Jeremy N. Wilson	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.  Jeremy N. Wilson	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, Lam aware th