# L23000080166

(Requestor's Name)
(Address)
(Address)
. (Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(000,000 2,000,000)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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#### COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: The Procurement So	urce LLC
(Name of Resulting	g Florida Limited Company)
	f Organization, and fees are submitted to convert an "Other ty Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this	s matter to:
Northwest Registered Agent LLC	
(Contact Person)	
(Firm/Company)	<del></del>
7901 4th St N STE 300 (Address)	<del></del>
St. Petersburg, FL 33702 (City, State and Zip Code)	
eastern@northwestregisteredagent.com E-mail Address: (to be used for future annual report of further information concerning this matter.)	
	(_509) 768-2249
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (a dollars and drawn on a bank located in the Units	All checks processed by this office must be payable in US ed States)
	S180.00 Filing Fees  I Certified Copy  Certified Copy, and Certificate of 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

## 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 w Statutes.	zith s.605.	1045, F	Horida
The name of the "Other Business Entity" immediately prior to the filing of the Artic The Procurement Source LLC	les of Con	version	ı 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, comm	on law or bu	tsiness tr	ust, etc
First organized, formed or incorporated under the laws of Georgia			_
(Enter state, or if a non-U.S. entity, th	e name of th	ie countr	у)
on 10/25/19 (date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Florida Limited Liability Company as set forth in the attached Art  Output  Description: The name of the Indian Company and Indian Company at the Indian Company at the Indian Company and Indian Company at the Indian Company	icles of O	rganiz	ation:
The Procurement Source LLC			
(Enter Name of Florida Limited Liability Company)	<u>-</u> ·		
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 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 dadocument'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 apprain	90 calend: te will not b	e listed a	as the
which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.			
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Signed this 1st day of February	20_23
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:	Title PRESIDENT
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Base Full	
Signature: Buy full Printed Name: Blocky FARISTS	_Title: _ PRESTIGAT
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
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 ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional) 2023 - 11 - 3 PH 12: 02

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	201101	
ARTICLE I - Name:		
The name of the Limited Liability Company	81	
The Procurement Source LLC (Must contain the words "Limited Liab	Bite Commun. "L. L. C. " or "L.	( ( · ··)
(Attist Comain the Words - Emitted Clab	my Company, Catalon, or the	(A.C.)
ARTICLE II - Address:	the state of the state of	South of Containing Commencer in
The mailing address and street address of the	principal office of the L	limited Liability Company is:
Principal Office Address:	Mailing Address:	
39 Jeffrey Drive	39 Jeffrey Drive	
Sarasota FL 34238	Sarasota FL 34238	<u> </u>
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Regions entity with an active Florida registration.)	red Office, & Registere gistered Agent, You must desig	ed Agent's Signature: nate an individual or another
The name and the Florida street address of the	e registered agent are:	
Northwest Registered A	Agent LLC	
Na	nie	
7901 4th St N STE 300		
Florida street address (P.		e)
St. Petersburg	<sub>FL</sub> FL	
City	Zip	_
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as a	in this certificate, I here acity. I further agree to e performance of my du	thy accept the appointment as comply with the provisions of all ties, and I am familiar with and
Toplan Neur		20
	gnature (REQUIRED)	2023 Fc.L
Kedistered Wacitt 2 2)	ignature (KEQOIKED)	ب د -
		<u></u> · <del></del> <del>.</del>
(CONT)	INUED)	

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

ACM 15 (C	
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Barry Farris
<u> </u>	39 JEFFREY DR
	Sarasota FL 34238
	<del></del>
(Use attachment if necessary)	
LE V; Other provisions, if any.	
Signature of a member or a 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, I am aware ment to the Department of State constitutes a third degree f
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S.  Nat Smith	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware nent to the Department of State constitutes a third degree f
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S.  Nat Smith	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware ment to the Department of State constitutes a third degree for printed name of signee
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Nat Smith  Type	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware ment to the Department of State constitutes a third degree feed or printed name of signee  Filing Fees
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Nat Smith  Type  \$125.00 Filing Fee for Articles of	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware ment to the Department of State constitutes a third degree for printed name of signee  Filing Fees  f Organization and Designation of Registered
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Nat Smith  Type	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware ment to the Department of State constitutes a third degree for printed name of signee  Filing Fees  f Organization and Designation of Registered