12300345478

(Req	uestor's Name)
(Addı	ress)	
(Add	ress)	
(City/	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Na	me)
(Doc	ument Number)
Certified Copies	Certificate	es of Status
Special Instructions to F	iling Officer:	

Office Use Only



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2023 APR 19 PM 1: 1 SECRETARY OF STATE

COVER LETTER

TO:	New Filing So Division of Co					
		S INFORMING YOU LL	C.			
SUBJ	ECT:	(Name of Res	ulting Florida Li	mited Cor	npany)	
The cr Busine	nclosed Articles ess Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organiz ability Compa	ation, ar ny" in a	nd fees are submitted to conver accordance with s. 605.1045, F	rt an "Other .S.
Please	return all corre	espondence concerning	g this matter to);		
RICH	SPIELMAN					
		(Contact Person)				
INSID	ERS INFORMIN	G YOU LLC.				
		(Firm/Company)				
1426 9	SIMPSON RD#	222				
		(Address)				
Kissim	nmee, FL 34744					
	((Tity, State and Zip Code)				
QUES	TIONS@INSIDE	ERSINFORMINGYOU.C	ОМ			
E-n	nail Address: (10 b	e used for future annual re	port notifications)		
For fu	rther information	on concerning this ma	tter, please cal	1:		
RICH	SPIELMAN		_at (, 454	5474	
	(Name of Conta	ct Person)	(Area Co	de) (Da	ytime Telephone Number)	
		or the following amou a bank located in the			sed by this office must be paya	able in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Fil and Certified (☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis	Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 850 chassee, FL 32303	2023 APR 19 PM

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:

INSIDERS INFORMING YOU 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
15, April, 2015 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
INSIDERS INFORMING YOU 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.

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SECRETARY OF STATE
TALLAHASSEE STATE

Signed this 20 day of MARCH	_ 20 <u>_ 23</u>
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Printed Name: RICH SPIELMAN	Title: MGR
France Name, Mory of IEE MAN	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name; BRIAN PIECMAN	and AlcD
Printed Name: BRIAN PIELMAN	Little: MGR
Sionature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
C:	
Signature:Printed Name:	Title
rimed Name.	
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	92d
Printed Name:	Time:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
reprint a 20 miles a collection of facility of the facility of	to Douteoughine
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of one ocheral Farmer.	
<u>lf Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of <u>ALL</u> 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:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the I	ame:		
	.imited Liability Company	is:	
INSIDERS INFORI			
(8	fust contain the words "Limited Lia	hility Company, "L.L.C.," or "LLC.")	
ARTICLE II - A		e principal office of the Limited	Liability Company is:
Principal Office		Mailing Address:	
i imerpar office	Address.	Maning Montess.	
1426 Simpson Rd.	#222	1426 Simpson Rd. #222	
Kissimmee, FL		Kissimmee, FL	
34744		34744	····
	Jason Spielman		
•	1426 Simpson Rd. #222	ame	
	1426 Simpson Rd. #222	ame P.O. Box <u>NOT</u> acceptable)	
	1426 Simpson Rd. #222		
	1426 Simpson Rd. #222 Florida street address (I	P.O. Box <u>NOT</u> acceptable)	

ARTICLE IV-

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

"MGR" = Manager MGR	Rich Spielman
WOIL	1426 Simpson Rd. #222
	Kissimmee, FL 34744
	<u> </u>
(Use attachment if necessary)	
	•
LE V: Other provisions, if any.	
T.P. V. Other provisions, it any.	
REQUIRED SIGNATURE	
Me	

as provided for in s.817.155. F.S.

RICH SPIELMAN

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 (The Bona) \$ 30.00 Certified Copy (Optional)