

L23000397693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

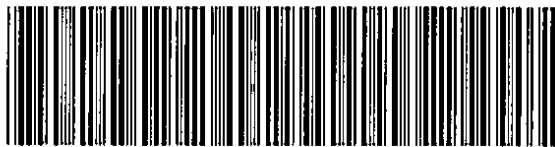
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Requester's Name

315 South Calhoun Street, suite 600

Address

Tallahassee, FL 32301 (850)425-5686

City/State/Zip

Phone #

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Living Secure Insurance Advisors, LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

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☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☒ Amendment Conversion
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

**ARTICLES OF CONVERSION
FOR
"OTHER BUSINESS ENTITY"
INTO
FLORIDA LIMITED LIABILITY COMPANY**

This Certificate 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 this Certificate of Conversion is Living Secure Insurance Advisors, Inc.
2. The "Other Business Entity" is a corporation first organized, formed or incorporated under the laws of Florida on September 1, 2011.
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization is LIVING SECURE INSURANCE ADVISORS, LLC.
5. This Certificate of Conversion is effective on August 24, 2023.
6. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Signed this 24th day of August, 2023.

Signature on behalf of Other Business Entity:

Signature of Chairman, Vice Chairman, Director, or Officer.

By: /s/ Odalys C. Arevalo _____
Name: Odalys C. Arevalo
Title: President

Signature of Authorized Representative of the Limited Liability Company:

/s/ Odalys C. Arevalo _____
Name: Odalys C. Arevalo
Title: Authorized Representative

**ARTICLES OF ORGANIZATION
OF
LIVING SECURE INSURANCE ADVISORS, LLC**

The undersigned, being a duly authorized representative of the sole member (the "Member") of LIVING SECURE INSURANCE ADVISORS, LLC (the "Company"), desiring to form a limited liability company under and pursuant to the Florida Limited Liability Company Act, Chapter 605, Florida Statutes, does hereby adopt the following Articles of Organization:

**ARTICLE I
NAME**

The name of the Company is LIVING SECURE INSURANCE ADVISORS, LLC.

**ARTICLE II
ADDRESS**

The principal and mailing address of the Company is:

7757 W Flagler Street, Suite 210
Miami, FL 33144

**ARTICLE III
REGISTERED AGENT AND OFFICE**

The Company designates 7757 W Flagler Street, Suite 210, Miami, FL 33144 as the street address of the initial registered office of the Company and names Odalys C. Arevalo, as the Company's initial registered agent at that address to accept service of process within this state.

**ARTICLE IV
DURATION AND CONTINUATION**

The period of the Company's duration shall commence with the filing of these Articles of Organization with the Secretary of State, and shall continue perpetually, unless terminated in accordance with the Revised Florida Limited Liability Act, as amended from time to time.

**ARTICLE V
MANAGEMENT**

The Company shall be conducted, carried on, and managed by at least one (1) Manager and is, therefore, a manager-managed Company. The names and addresses of the initial persons authorized to manage and control the Company are:

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PM 2:12

<u>Title</u>	<u>Name and Address:</u>
Manager	Odalys C. Arevalo 7757 W Flagler Street, Suite 210 Miami, FL 33144
Manager	Mercedes Cabrera 7757 W Flagler Street, Suite 210 Miami, FL 33144

ARTICLE VII **PURPOSE**

The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida including activities within the United States and abroad.

ARTICLE VIII **ADDITIONAL MEMBERS**

Additional Members may be admitted upon the written consent of all of the members of the Company.

ARTICLE IX **EFFECTIVE DATE**

The effective date of these Articles of Organization is August 24, 2023.

IN WITNESS WHEREOF, the undersigned has hereunto set her hand and seal this 24th of August, 2023.

/s/ Odalys C. Arevalo
Odalys C. Arevalo.
Duly Authorized Representative of the
Member

ACCEPTANCE OF REGISTERED AGENT

The undersigned agrees to act as registered agent for LIVING SECURE INSURANCE ADVISORS, LLC to accept service of process at the place designated in these Articles of Organization, and to comply with the provisions of Chapter 605, Florida Statutes, and acknowledges that the undersigned is familiar with, and accepts, the obligations of such position on this 24th day of August, 2023.

/s/ Odalys C. Arevalo
Odalys C. Arevalo

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