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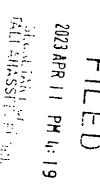
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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04/11/23--01036--001 **150.00





COVER LETTER

TO:	New Filing Division of	Section Corporations		•		
SUBJ	ECT: ACTIVI	E SOLUTIONS LLC				
13 (sulting Florida l	Limited Co	ompany)	
The er Busin	nclosed Articl ess Entity" int	es of Conversion, Arti to a "Florida Limited L	cles of Organi Liability Comp	zation, a	and fees are submitted to convert an "Othe accordance with s. 605.1045, F.S.	r
Please	return all cor	respondence concernir	ng this matter	to:		
KERRI	L. KOPERVO	S				
		(Contact Person)				
COOP	ER LEVENSO	N, P.A.				
	<u> </u>	(Firm/Company)				
1125 A	TLANTIC AVE	., 3RD FLOOR				
		(Address)				
ATLAN	TIC CITY, NJ (08401				
	(City, State and Zip Code)				
KKOPE	RVOS@COO	PERLEVENSON.COM				
E-ma	il Address: (to b	e used for future annual re	port notification	s)		
For fur	her informati	on concerning this ma	tter, please ca	И:		
KERRI	KOPERVOS		_at (, 572-	-7436	
	(Name of Conta	ct Person)	(Area Co	de) (Day	ytime Telephone Number)	
Enclose Iollars	d is a check f and drawn on	or the following amou a bank located in the	int: (All check United States)	s proces	sed by this office must be payable in US	
\$25 for 0	00 Filing Fees Conversion or Articles zation)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fit and Certified (☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	

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.

The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: ACTIVE SOLUTIONS 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.)
First organized, formed or incorporated under the laws of [Enter state, or if a non-U.S. entity, the name of the country]
MARCH 2, 2004
(due of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ACTIVE SOLUTIONS ONE 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 23 day of MARCH	20 23
Signature of Authorized Representative of Li	mited Liability Company:
Signature of Authorized Representative: +53	all is that take
Signature(s) on behalf of Other Business Entity	[See below for required signature(s)]
Signature. 3. Stablini Printed Name: Ronald B. Stablini	Tiller
•	
Signature:	Title:
Signature: Printed Name.	Tale:
Signature:	
Printed Name:	Title:
Signature. Printed Name	
SignaturePrinted Name:	rid
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an Ir	corporator must sign.
lf Florida General Partnership or Limited Liabit	ity Partnership:
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	tv Limited Partnership:
All others:	
Signature of an authorized person.	
egs	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

2021 AN 1/9 SSELL ON 1/9

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must c	ontain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address an		cipal office of the Limited Liability Compa	rany is:	
Principal Office Addr	<u>(585)</u>	Mailing Address:		
6531 SE Federal Hwy Ap	n U1 12	6531 SE Federal Hwy Apt U112		
Smart, FL 34997		Stuart, FL 34997	Stuart, FL 34997	
Stuart, Ft. 54977				
ARTICLE III - Regist (The Limited Liability Comp business entity with an activ	oany cannot serve as its own Reg e Florida registration.)	Office, & Registered Agent's Signature: jistered Agent. You must designate an individual or	another	
ARTICLE III - Regist (The Limited Liability Comp business entity with an activ	oany cannot serve as its own Reg e Florida registration.) da street address of the reg Ronald B. Stablini	istered Agent. You must designate an individual or a	another	
ARTICLE III - Regist (The Limited Liability Comp business entity with an activ	oany cannot serve as its own Reg e Florida registration.) du street address of the reg Ronald B. Stablini	istered Agent. You must designate an individual or itstered agent are:	another	
ARTICLE III - Regist (The Limited Liability Comp business entity with an activ	oany cannot serve as its own Reg e Florida registration.) da street address of the reg Ronald B. Stablini 10431 SE Jupiter Nanc	istered Agent. You must designate an individual or instered agent are: Name ows Dr	another	
ARTICLE III - Regist (The Limited Liability Comp business entity with an activ	oany cannot serve as its own Reg e Florida registration.) da street address of the reg Ronald B. Stablini 10431 SE Jupiter Nanc	istered Agent. You must designate an individual or itstered agent are:	another	

(CONTINUED)

Begistered Agent's Signature (REQUIRED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Joseph J. Gingerelli
	6531 SE Federal Hwy Apt U112
	Stuart, FL 34997
AMBR	Ronald B. Stablini
	10431 SE Jupiter Narrows Dr
	Hobe Sound, FL 33455
	
	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than th	e date of filing: (OPTIONAL)
days after the date of filing.)	ne specific and cannot be more than five business days prior to or 90 calendar
ARTICLE VI: Other provisions, if any.	
	^
	Ma X. M.
REQUIRED SIGNATURE:	Signature of a member or an authorized representative
`.	

(In accordance with section 605,0205 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Joseph Gingerelli

Typed or printed name of signee

Filing Fees:

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