# L23000433642

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

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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

	I
RESURGE AGENCY, LLC	<del></del> ,
Please Debit FCA000000003 For: 150	
Thank you Seth Neeley	
145/	Art of Inc. File
	LTD Partnership File
	·
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
Signature //	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

## **COVER LETTER**

Division of C				
SUBJECT: RESUR	GE AGENCY, LLC			
	(Name of Res	ulting Florida Limi	ted Con	npany)
The enclosed Article Business Entity" into	s of Conversion, Artic o a "Florida Limited Li	les of Organizat ability Company	ion, an 7" in a	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
Eric Gros-Dubois, Esq	ļ.			
	(Contact Person)		_	
EPGD Attorneys at La	w, P.A.			
	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	_	
777 SW 37th Ave, Sui	te 510			
·	(Address)		_	
Miami, FL 33135				
(1	City, State and Zip Code)		-	
eric@epgdlaw.com				
E-mail Address: (to b	e used for future annual re	port notifications)	-	
For further informati	on concerning this ma	tter, please call:		
Eric Gros-Dubois, Esq	ļ.	_at (	837-	
(Name of Conta	act Person)	(Area Code	) (Day	ytime Telephone Number)
Enclosed is a check dollars and drawn on	for the following amou a bank located in the	int: (All checks p United States)	proces	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 Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add				t Address:
New Filing S Division of C				Filing Section
P.O. Box 632				ion of Corporations 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 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: RESURGE AGENCY, 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)
11/28/2022
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
RESURGE AGENCY, 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 <u>18</u> day of <u>Septem bea</u>	<del></del>
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative:	Aut Out
Signature of Authorized Representative: Printed Name: Garrett Francis Jackson	Title: Manager
	Time.
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Chipmer Chi	
Printed Name: Garrett Francis Jackson	Title: Manager
	0-
Signature:	
rinted Name: Cameron Joseph Fistori	Title: Manager
Signature:	
Printed Name:	Title:
	180.
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
orginature.	
Tinted Name:	Title
rinted Name:	Title:
	Title:
f Florida Corporation:	
f Florida Corporation: Signature of Chairman, Vice Chairman, Director, o	r Officer.
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I	or Officer. Incorporator must sign.
f Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I	or Officer. Incorporator must sign.
Signature:  Printed Name:  If Florida Corporation:  Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an Interest of Signature of one General Partner.	or Officer. Incorporator must sign.
f Florida Corporation:  Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I f Florida General Partnership or Limited Liabi Signature of one General Partner.	or Officer. Incorporator must sign. Ility Partnership:
f Florida Corporation:  Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I  f Florida General Partnership or Limited Liabi Signature of one General Partner.  f Florida Limited Partnership or Limited Liabi	or Officer. Incorporator must sign. Ility Partnership:
f Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I	or Officer. Incorporator must sign. Ility Partnership:
f Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I f Florida General Partnership or Limited Liabi Signature of one General Partner.  f Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners.	or Officer. Incorporator must sign. Ility Partnership:
f Florida Corporation:  Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I f Florida General Partnership or Limited Liabi Signature of one General Partner.  f Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners.  All others:	or Officer. Incorporator must sign. Ility Partnership:
f Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I  f Florida General Partnership or Limited Liabi Signature of one General Partner.  f Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners.  All others:	or Officer. Incorporator must sign. Ility Partnership:
f Florida Corporation:  Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I  f Florida General Partnership or Limited Liabi Signature of one General Partner.  f Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners.  All others: Signature of an authorized person.	or Officer. Incorporator must sign. Ility Partnership:
f Florida Corporation:  Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I  f Florida General Partnership or Limited Liabi Signature of one General Partner.  f Florida Limited Partnership or Limited Liabi	or Officer. Incorporator must sign. Ility Partnership:
f Florida Corporation:  Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I  f Florida General Partnership or Limited Liabi Signature of one General Partner.  f Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners.  All others: Signature of an authorized person.	or Officer. Incorporator must sign. Ility Partnership:
f Florida Corporation:  Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I f Florida General Partnership or Limited Liabi Signature of one General Partner.  f Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners.  All others:  Signature of an authorized person.	or Officer. Incorporator must sign.  ility Partnership:  ility Limited Partnership:  \$25.00
f Florida Corporation:  Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I f Florida General Partnership or Limited Liabi Signature of one General Partner.  f Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners.  All others:  Signature of an authorized person.  Sees:  Articles of Conversion:	sr Officer. Incorporator must sign.  ility Partnership:  ility Limited Partnership:  \$25.00 \$125.00
f Florida Corporation:  Gignature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I f Florida General Partnership or Limited Liabi Gignature of one General Partner.  f Florida Limited Partnership or Limited Liabi Gignatures of ALL General Partners.  All others: Gignature of an authorized person.  Gees:  Articles of Conversion: Fees for Florida Articles of Organization:	or Officer. Incorporator must sign.  ility Partnership:  ility Limited Partnership:  \$25.00

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability	y Company is:		
RESURGE AGENCY, LLC			
(Must contain the word	ls "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and street ac	ldress of the pr	incipal office of the Limite	ed Liability Company is
Principal Office Address:		Mailing Address:	
777 SW 37th Ave, Suite 510		777 SW 37th Ave, Suite 5	10
Miami, FL 33135		Miami, FL 33135	<del></del>
ARTICLE III - Registered Age (The Limited Liability Company cannot ser business entity with an active Florida regis	ve as its own Regis	l Office, & Registered Ag tered Agent. You must designate an	ent's Signature: individual or another
The name and the Florida street a	address of the i	registered agent are:	
EPGD Attorne	ys at Law, P.A.		
	Name	e	
777 SW 37th	Ave, Suite 510		
Florida stree	et address (P.O	Box NOT acceptable)	
Miami		FL 33135	
	City	Zip	

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)

A	DT	IC	16	IV-
	т.		L P.	. I V -

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

Title:	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager	<b>-</b>			
MGR	Garrett Francis Jackson			
	777 SW 37th Avenue, Suite 510			
	Miami, FL 33135			
MGR	Cameron Joseph Fistori			
	777 SW 37th Avenue, Suite 510			
	Miami, FL 33135			
	<u> </u>			
(Use attachment if necessary)				
CLE V: Other provisions, if any.				
DEOLIBED SIGN CONTROL	/			
REQUIRED SIGNATURE:	/			

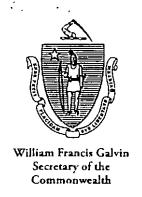
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Eric Gros-Dubois, Esq., Authorized Representative

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)



## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

August 25, 2023

### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

### RESURGE AGENCY, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on November 28, 2022.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: GARRETT FRANCIS JACKSON, CAMERON JOSEPH FISTORI

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: GARRETT FRANCIS JACKSON, CAMERON JOSEPH FISTORI

The names of all persons authorized to act with respect to real property listed in the most recent filing are: GARRETT FRANCIS JACKSON, CAMERON JOSEPH FISTORI



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

lein Travino Galecin

Processed By:HN