# L23000496701

(Re	questor's Name)	-
(Ad	dress)	<del></del>
- (Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu:	siness Entity Nai	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to f	Filing Officer:	

Office Use Only





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#### **COVER LETTER**

TO: New Filing	Section Corporations				
	•				
SUBJECT: Blue F	Plum Collections, LLC	- <u></u> -			_
	(Name of Re	sulting Florida Limi	ted Con	npany)	
	eles of Conversion, Artic nto a "Florida Limited L	•			
Please return all co	orrespondence concernin	g this matter to:			
Terryl Snyder					
	(Contact Person)		-		
Blue Plum Collection	ns. LLC				
	(Firm/Company)		_		
6350 Techster Blvd,	Suite 2				
	(Address)		_		
Fort Myers, FL 3396	6				
	(City, State and Zip Code)		-		37.00 pg
blueplumcollections	@gmail.com				23 007 23 007
E-mail Address: (t	o be used for future annual re	port notifications)	_		- 44 9
For further information	ation concerning this ma	itter, please call:			- : - <del></del>
Teri Snyder		at ( <sup>509</sup>	670-7	<b>'</b> 197	- မြောင်း - မြောင်း - မြောင်း
(Name of Co	ntact Person)	_ \	) (Day	time Telephone Number)	
	k for the following amou on a bank located in the	-	orocess	ed by this office must t	pe payable in US
\$150.00 Filing Fee (\$25 for Conversion & \$125 for Articles of Organization)	s =\$155,00 Filing Fees and Certificate of Status	□\$180,00 Filing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	
Mailing Ac New Filing Division of			New I	Address: Filing Section on of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

# **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.

1. The name of the "Other Business Entity" immediately prior to the filing of the A Blue Plum Collections, LLC	Articles of Conversion is:
(Enter Name of Other Business Entity)	<del></del>
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, co	ammon law or business trust, etc. I
Washington State	
First organized, formed or incorporated under the laws of(Enter state, or if a non-U.S. entit	y, the name of the country)
April 9, 2020 on (date of organization, formation or incorporation)	20 23
3. The name of the Florida Limited Liability Company as set forth in the attached	Articles of Organization:
Blue Plum Collections, 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 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, the document's effective date on the Department of State's records.	is date will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statu	ites.

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 13th day of October	20 <u>23</u>
Signature of Authorized Representative of Lim	tited Liability Company:
1.	1 & du
Signature of Authorized Representative:	y Sylle_
Signature of Authorized Representative: July Printed Name: Terryl	Title: Snyder
Signature(s) on behalf of Other Business Entity:	
Signature (s) on occurrence of our Dusmess Emily:	joet below for required signature (5)
Signature: Levyl Snylle	
Printed Name: Terry/Snyder	Title: Member
C'	
Signature:Printed Name:	Title
Filitted Name.	riue.
Signature:	
Printed Name:	Title:
Signature;	Title
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	77' 1
Printed Name:	litle:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Ir	
MELLIC ID A LE LES ALES	ta Disassisti
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ny Partnersnip:
Signature of one General Farmer.	
If Florida Limited Partnership or Limited Liabil	ity Limited Partnership:
Signatures of ALL General Partners.	
A III ash a was	
All others: Signature of an authorized person.	
Signature of all addition zed person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is	S.	
Blue Plum Collections, LLC		
(Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	orincipal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
6350 Techster Blvd, Suite 2	6900 Daniels Pkwy Ste 29,	#165
Fort Myers, FL 33966	Fort Myers, FL 33912	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)		
The name and the Florida street address of the	registered agent are:	
Terryl Snyder		
Name		PH 6: 38
6350 Techster Blvd, Suite 2		한 33 12 36 12 36
Florida street address (P.	O. Box <u>NOT</u> acceptable)	
Fort Myers	FL 33966	
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)

#### ARTICLE IV-

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

"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Terryl Snyder	<del></del>
	6350 Techster Blvd, Suite 2	_
	Fort Myers. FL 33966	
<del></del>		
_		
<del> </del>		
	<u></u>	<u> </u>
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(Use attachment if necessary)	Ţ.	
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		; :
<b>LE V:</b> Other provisions, if any.		·

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 \$.817.155, F.S.

Terryl Snyder

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)