

L23000516318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

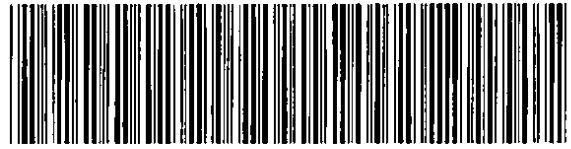
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700418724027

11/13/23--01040--006 ++150.00

2023 Nov 13 11:2:08

ma

GASSMAN, CROTTY & DENICOLO, P.A.

ATTORNEYS AT LAW

1245 COURT STREET
CLEARWATER, FL 33756
TELEPHONE: (727) 442-1200
FAX: (727) 443-5829
WWW.GASSMANLAW.COM

ALAN S. GASSMAN*+
KENNETH J. CROTTY***^
CHRISTOPHER J. DENICOLO***+
BRANDON L. KETRON*~
WESLEY J. DICKSON
ELIZABETH A. HOLLOWAY

*LL.M. IN TAXATION
+BOARD CERTIFIED LAWYER
WILLS, TRUSTS AND ESTATES
***LL.M. IN ESTATE PLANNING
^BOARD CERTIFIED LAWYER TAX LAW
~CERTIFIED PUBLIC ACCOUNTANT

**November 9, 2023
VIA UPS**

Florida Department of State / Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: SOUTHEAST CONSULTING SERVICES, INC.
Document Number: P00000029668**

Dear Sirs/Madams:

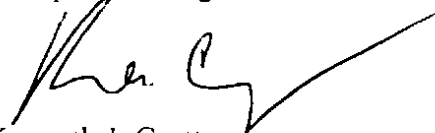
Enclosed for filing please find a Certificate of Conversion and Articles of Organization whereby SOUTHEAST CONSULTING SERVICES, INC., a Florida profit corporation, will convert into SOUTHEAST CONSULTING SERVICES, LLC, a Florida limited liability company.

Please also find enclosed a check made payable to the Department of State in the amount of \$150.00 for filing fees.

Please provide our office with confirmation of filing in the enclosed self-addressed, stamped envelope.

Please contact Tina Arvin of my office if you have any questions on the attached.

Best personal regards,



Kenneth J. Crotty

KJC:tja
Enclosures

cc: John J. Zacco (w/encls. via email johnny@eastlinecentral.com)

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:
SOUTHEAST CONSULTING SERVICES, INC.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on 03/16/2000
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
SOUTHEAST CONSULTING SERVICES, L.L.C

(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.

2023 NOV 13 PM 2:06

Signed this 9 day of November 2023.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]
Printed Name: Alan S. Gassman Title: Authorized Representative

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: [Signature]
Printed Name: JOHN J. ZACCO Title: PRESIDENT

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

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

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL 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)

2023 NOV 13 12:06
ALL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SOUTHEAST CONSULTING SERVICES, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

8680 SW HWY 200

OCALA, FL 34481

Mailing Address:

8680 SW HWY 200

OCALA, FL 34481

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

JOHN J. ZACCO

Name

8680 SW HWY 200

Florida street address (P.O. Box **NOT** acceptable)

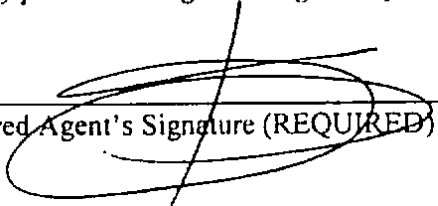
OCALA

City

FL 34481

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)

2023 NOV 13 PM 2:06
CALL

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

JOHN J. ZACCO

8680 SW HWY 200

OCALA, FL 34481

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

SEE ATTACHMENT

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.

Alan S. Gassman, 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)

2023 NOV 13 11:21:06

**ATTACHMENT TO
ARTICLES OF ORGANIZATION
OF
SOUTHEAST CONSULTING SERVICES, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

Written Operating Agreement

Any operating agreement entered into by the Members of the Limited Liability Company, and any amendments or restatements thereof, shall be in writing, and shall govern all matters relating to the governance of the affairs of the Limited Liability Company, the conduct of its business and the relations of its Members, including without limitation, the amendment of these Articles. No oral agreement among any of the Members or Managers of the Limited Liability Company shall be deemed or construed to constitute any portion of, or otherwise affect the interpretation of, any written operating agreement of the Limited Liability Company, as amended and in existence from time to time.

2023 NOV 13 PM 2:08
PAGE 1 OF 1