L23000 527613

(Requestor's Name)
(Address)
(A d d)
(Address)
(Address)
(*1001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer.

Office Use Only



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COVER LETTER .

TO: New Filing Section Division of Corporations		
SUBJECT: Veteran Services, LLC		
(Name of F	Resulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Art Business Entity" into a "Florida Limited	-	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concern	ing this matter to:	
Daniel B Taylor		
(Contact Person)		
Veteran Services, LLC		
(Firm/Company)		
720 Elizabeth St, Unit 4		
(Address)		
Key West, FL 33040		
(City, State and Zip Code	<u> </u>	
dstaylor95@gmail.com		
E-mail Address: (to be used for future annual	report notifications)	
For further information concerning this n	natter, please call:	
Daniel B Taylor	at (<u>858</u>	, 204-5444
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following am dollars and drawn on a bank located in the	•	rocessed 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	s \$180.00 Filing and Certified Cop	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Veteran Services, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
5 May 2011
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Veteran Services, 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.

111041	File#_	-	~	-	-	- •
LLC-1	[' "" —					

ENDORSED - FILED in the office of the Secretary of State of the State of California

MAY - 5 2011

LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION

A \$70.00 filing fee must accompany this form.	
IMPORTANT - Read instructions before completing this form.	This Space For Filing Use Only
ENTITY NAME (End the name with the words "Limited Liability Company," or the abbreviated to "Ltd." and "Co.," respectively.)	ations "LLC" or "L.L.C." The words "Limited" and "Company"
. NAME OF LIMITED LIABILITY COMPANY	
Veteran Services, LLC	
PURPOSE (The following statement is required by statute and should not be altered.)	
2. THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COM	VFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY IPANY ACT.
INITIAL AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the ag- completed. If the agent is a corporation, the agent must have on file with the California S section 1505 and Item 3 must be completed (leave Item 4 blank).	ent must reside in California and both Items 3 and 4 must be secretary of State a certificate pursuant to Corporations Code
3. NAME OF INITIAL AGENT FOR SERVICE OF PROCESS	
Legalzoom.com, Inc.	
4 IF AN INDIVIDUAL, ADDRESS OF INITIAL AGENT FOR SERVICE OF PROCESS IN CALIF	ORNIA CITY STATE ZIP CODE CA
	CA
MANAGEMENT (Check only one)	
5. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY	
ONE MANAGER	
MORE THAN ONE MANAGER	
ALL LIMITED LIABILITY COMPANY MEMBER(S)	
ADDITIONAL INFORMATION	
6. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCO OF THIS CERTIFICATE.	RPORATED HEREIN BY THIS REFERENCE AND MADE A PART
EXECUTION	
7. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTE	ON IS MY ACT AND DEED.
5/4/2011	
DATE SIGNATURE OF ORGA	ANIZER
Karla Figueroa	
TYPE OR PRINT NAM	E OF ORGANIZER
	APPROVED BY SECRETARY OF STA

Signed this 15th	day of Novermber	20_ _ 23
Signature of Aut	horized Representative of Limi	ited Liability Company:
	orized Representative:	z1.
Signature of Auth	orized Representative:	Till Davidson
Printed Name: Dar	niel B Taylor	Title: President
		[See below for required signature(s)]
Signature:	Ph-	
Printed Name: Dat	niel B Taylor	Title: President
Times i vame.		
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		(12)
Printed Name:		Title:
Cianatura:		
Printed Name:		Title:
rimea rame		
Signature:		
Printed Name:		Title:
If Florida Corpor		
	man, Vice Chairman, Director, or	
If Directors or Off	icers have not been selected, an In-	corporator must sign.
16 F1: J - C	1 Danas and the second contact of the title	D. D. Lander
Signature of one C	il Partnership or Limited Liabili	ty rartnership:
Signature of one C	deficial rattlet.	
If Florida Limited	d Partnership or Limited Liabili	ty Limited Partnershin:
	General Partners.	<u> </u>
All others:		
Signature of an au	thorized person.	
Fees:		
		•••
	Conversion:	\$25.00
	lorida Articles of Organization:	\$125.00
Certified (• •	\$30.00 (Optional)
Certificate	of Status:	\$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Lin	nited Liability Company	is:	
Veteran Services, LLC		ibility Company, "L.L.C.," or "L.L.C.")	
(SUIV)	contain the words. Entitled Da	many Company. 12.12.C., or 1.12.7	
ARTICLE II - Add			
The mailing address	and street address of the	e principal office of the Limited	Liability Company is:
Principal Office Ac	ldress:	Mailing Address:	
720 Elizabeth St		720 Elizabeth St	
Unit 4		Unit 4	
Key West Fl 33040		Key West FI 33040	
	orida street address of the Daniel B Taylor No	ame	FILE MARSSER
	720 Elizabeth St, Unit 4		12
•	Florida street address (l	P.O. Box <u>NOT</u> acceptable)	: 55
I	Key West	_{FL} 33040	
•	City	Zip	
liability compa registered agent a statutes relating	ny at the place designate nd agree to act in this ca to the proper and comple gations of my position as	nd to accept service of process for d in this certificate, I hereby accepacity. I further agree to comply ete performance of my duties, and registered agent as provided for Signature (REQUIRED)	ept the appointment as with the provisions of all I I am familiar with and

(CONTINUED)

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

<u>Title:</u>	Name and Address:						
"AMBR" = Authorized Member							
"MGR" = Manager							
MGR	Daniel B Taylor						
	720 Elizabeth St, Unit 4						
	Key West FL 33040						
							
	702						
	123 MOV 20						
	- SS						
	\$5.50 \$5.50						
(Use attachment if necessary)	2						
CLEV. Other provisions if any							
CLE V: Other provisions, if any.							
REQUIRED SIGNATURE:							
TOWN.							
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that						
any false information submitted in a docu	ment to the Department of State constitutes a third degree felony						
as provided for in s.817.155, F.S.	,						
Daniel B Taylor							
Ty	ped 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)