# L24000003643

(Requestor's Na	ime)
(Address)	
(Address)	
(City/State/Zip/F	Phone #)
PICK-UP WAI	T MAIL
(Business Entity	y Name)
(Document Nun	nber)
Certified Copies Certifi	cates of Status
Special Instructions to Filing Office	· · · · · · · · · · · · · · · · · · ·
Special instructions to Filing Office	

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE : 223897 8111810
AUTHORIZATION: Include man
COST LIMIT : /\$ 15.0.00
ORDER DATE : December 21, 2023
ORDER TIME : 2:41 PM
ORDER NO. : 223897-010
CUSTOMER NO: 8111810
DOMESTIC AMENDMENT FILING  NAME: NEWTON VENTURES, LLC
EFFECTIVE DATE:
articles of conversion and overline restated articles of incorporation
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker EXT#

EXAMINER'S INITIALS:



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 22, 2023

CSC

RESUBMIT

Please give original submission date as file date.

SUBJECT: NEWTON VENTURES, LLC. Ref. Number: W23000169536

We have received your document for NEWTON VENTURES, LLC.. However, the document has not been filed and is being returned for the following:

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 623A00029251

2023 DEC 28 AMJI: 11.

## **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Newton Ventures, LLC.
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Christopher D. Newton (Contact Person)
(Contact Person)
Newton Ventures, LLC
2734 Tartus Dr.
(Address)
Tacksmyille Fl 32246
Jacksonville, FL 32246 (City, State and Zip Code)
inewton 2002 e outlook. com
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Chris or Jeannine Newton at (919) 609-2420
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$150.00 Filing Fees (\$25 for Conversion and Certificate of Status of Organization)  \$150.00 Filing Fees   \$180.00 Filing Fees and Certified Copy   \$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: Street Address:
New Filing Section New Filing Section
Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee
Tallahassee, FL 32314 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 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:  Newlon Ventures, 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 North Carolina USA  (Enter state, or if a non-U.S. entity, the name of the country)
on May 18, 2015 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Newton Ventures, 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 21 day of December	20_23
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	TOBA
Printed Name: Christopher D. Newton	Title: Manager
·	·
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	
Printed Name: Christopher D. Newton	Title: Manager
	_
Signature:Printed Name:	Tido
rimed Name.	
Signature:	
Signature:Printed Name:	Title:
Signatur.	
Signature:Printed Name:	- Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	_ Title:
If Florida Corporation:	08
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
On colons of Ornors have not open detected, an in-	or portator most organ
<u>lf Florida General Partnership or Limited Liabili</u>	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnershin:
Signatures of ALL General Partners.	ty Limited 1 arthersmp.
All others: Signature of an authorized person.	
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)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Newton Ventures, LLC.  (Must contain the words "Limited L	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2734 Tartus Dr. Jacksonville, FL 32246	2734 Tartus Dr. Jacksonville, FL 32246
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of CORPORATION SERVICE CO	
	Jame .
1201 HAYS STREI	Name ET
1201 HAYS STREI	
1201 HAYS STREI	ET
Florida street address	(P.O. Box <u>NOT</u> acceptable)

Eyluni Bahou
Assistant Vice President Registered Agent's Signature (REQUIRED)

(CONTINUED)

### ARTICLE IV-

as provided for in s.817.155, F.S.

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	
MGR	Christopher D. Newton
	2734 Tartus Dr.
	Jacksonville, FL 32246
<del></del>	
<del></del>	
(Use attachment if necessary)	
(Ose attachment is necessary)	
CLE V: Other provisions, if any.	
	,
	/
REQUIRED SIGNATURE:	7
# 1 1/1 ) 1/1	4
- was fine to	NV.
Signature of a member or	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware
any false information submitted in a docu	iment to the Department of State constitutes a third degree for

Christopher D. Newton

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)