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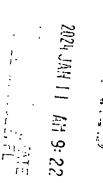
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: New Filing S Division of C							
SUBJECT: Emerald	National Title, LLC						
50D/2011	(Name of Res	ulting Florida Lin	ited Co	mpany)	_		
		•		nd fees are submitted to accordance with s. 605.		ı "Other	
Please return all corre	espondence concerning	g this matter to	:				
Erin M. Rose Quinn, E	sq.						
	(Contact Person)		_				
Emerald National Title	, LLC						
	(Firm/Company)		_				
19321 US Hwy 19 N, S	• •						
	(Address)		_				
Clearwater, FL 33764	(. radiess)						
((City, State and Zip Code)		_				
equinn@emeraldnation	naltitle.com						
E-mail Address: (to b	e used for future annual re	port notifications)	_				
For further informati	on concerning this ma	tter, please call	:				
Erin M. Rose Quinn, E	sq.	_at (<u>813</u>	\992-	5778			
(Name of Conta	ect Person)	at ((Area Cod	<u>/</u> e) (Da	ytime Telephone Number)			
	or the following amou a bank located in the	nt: (All checks		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 Filin and Certified Co	_	■\$185.00 Filing Fees. Certified Copy. and Certificate of Status	•	2024 JAH	l g
Mailing Add	ress:		Stree	et Address:	:		رده در ۱۰ ارست ار
New Filing S				Filing Section	•		u
Division of Corporations		Division of Corporations				العدان تا با تا	
P.O. Box 632 Tallahassee, I				Centre of Tallahassee N. Monroe Street, Suit	. 210-	بغ	لب
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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: Palladium Title, Inc. P2100021298
(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 (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S, entity, the name of the country)
March 1, 2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Emerald National Title, 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 27th day of Dece	ember 20 23
Signature of Authorized Represe	entative of Limited Liability Company:
Signature of Authorized Represent Printed Name: Erin M. Rose Quinn	ative: Title: President
Signature(s) on behalf of Other Bu	usiness Entity: [See below for required signature(s)]
Signature: KU	Viv.
Printed Name: Erin M. Rose Quinn	Title: President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairm	
If Directors or Officers have not bee	n selected, an Incorporator must sign.
If Florida General Partnership or	Limited Liability Partnership:
Signature of one General Partner.	
	Limited Liability Limited Partnership:
Signatures of <u>ALL</u> General Partners	
All others:	
Signature of an authorized person.	
Fees:	!

\$25.00 \$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Emerald National Title, LLC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LL.C.")	

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
19321 US Hwy 19 N, Suite 512	19321 US Hwy 19 N, Suite 512
Clearwater, FL 33764	Clearwater, FL 33764

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:

Erin M. Rose Quinn, Esq.	
Na	me
19321 US Hwy 19 N, Suite	512
Florida street address (P	.O. Box <u>NOT</u> acceptable)
Clearwater	FL 33764
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:

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Erin M. Rose Quinn	
	19321 US Hwy 19 N, Suite 512	
	Clearwater, FL 33764	
	 -	
		
		<u>~_</u>
		2024 JAN
		<u> </u>
(Use attachment if necessary)	1	
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	;	
TICLE V: Other provisions, if any.		3
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	1 (m) 101	25

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.

Erin M. Rose Quinn

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)