# L24000145319

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Ellin, Harre)
(Document Number)
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## 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 Article Corporate Development Solutions LLC	s of Conversion is:
(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 Pennsylvania (Enter state, or if a non-U.S. entity, the r	name of the country)
12/1/2020	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	les of Organization:
Corporate Development Solutions LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:  (The effective date of filing and the print to date of grant to a filed date nor many than 200.	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 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 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 appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S.	il rights the amount to
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	CD.

Signed this 28th day of February	20_ <b>24</b>
Signature of Authorized Representati	ive of Limited Liability Company:
Signature of Authorized Representative Printed Name: Carrington D. Smith	:Title: Sole Member
Signature(s) on behalf of Other Busines	ss Entity: [See below for required signature(s)]
Signature:  Printed Name: Carrington D. Smith	
Triffica (Valle)	Title: Oole (Welling)
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	real .
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, E	
If Directors or Officers have not been sele	ected, an incorporator must sign.
<u>If Florida General Partnership or Limi</u>	ted Liability Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limi Signatures of ALL General Partners.	ted Liability Limited Partnership:
Signatures of <u>ADD</u> Oction Futures.	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

\$125.00

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

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

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

The name of the Limited Liability Company is:
The name of the Emitted Liability Company is.
Corporate Dayslanment Calutions LLC
Corporate Development Solutions LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
(Musi contain the words Trinited Tracinty Company, Tataca, or Tacc.)
ARTICLE II - Address:
AKTICLE II - Address:

Principal Office Address:

ARTICLE L. Name:

#### Mailing Address:

1063 Bulkhead Road	411 Walnut St.
# 21719	PMB 21719
Green Cove Springs, FL 32043	Green Cove Springs, FL 32043-3443

#### 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:

Registered Agents Inc.		
Name		
7901 4th St N STE 300		
Florida street address (P.O. Box <u>NOT</u> acceptable)		
St. Petersburg	FL 33702	
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> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Carrington Smith, Solo Mambor
AMBH	Carrington Smith, Sole Member 411 Walnut Street, # 21719
	Green Cove Springs, FL 32043
	<del></del>
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
<u>REQUIRED</u> 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.

Carrington D. Smith		,	75
	Typed or printed name of signee	<u> </u>	_
	Filing Fees		=

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)