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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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07/27/23--01006--002 **185.00



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.

Denigna Consulting LL	
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Benig no Consulting LLC (Enterbane of Other Business Entity)	
2. The "Other Business Entity" is a \(\frac{22C}{\text{Enter entity type.}}\) Example: corporation, limited partnership, general partnership, common law or business trust, e	tc.
First organized, formed or incorporated under the laws of New York (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization Benigno Consulting LLC (Enter Name of Florida Limited Liability Company)	1:
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 30 day of -July	20 <u>2.3</u> .		
Signature of Authorized Representative of Limit	ed Liability Company:		
Signature of Authorized Representative: Jon Printed Name: Vanet Bengno	the Bengal Title: Manager		
Signature(s) on behalf of Other Business Entity:			
Signature Janet Benjano Printed Name: Janet Benjano	_Title:Managel		
Signature:Printed Name:	_ Title:		
Signature:Printed Name:			
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: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
Beniono Consulting (Must contain the words "Limited Publishy	LLC		
Must contain the words "Limited Mibility Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the printing address.	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
1402 NW 80th Ave, Unit 400 Margate, FL 33063	1400 NW 80th Ave, Unit 402		
Maryate, FL 33063	Margare, FL 33060		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual of another		
The name and the Florida street address of the re	gistered agent are:		
Mame Name			
79413 NW 1 Street			
Florida street address (P.O. Box NOT acceptable)			
Www.jk.te	FL 33W5		
City	Zip		
liability company at the place designated in registered agent and agree to act in this capaci stantes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and existered agent as provided for in Chapter 605, F.S		
Registered Agent's Sign	ature (REQUIRED)		
(CONTIN	UED)		

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager (Use attachment if necessary) **ARTICLE V:** Other provisions, if any. 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.

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)

Typed or printed name of signee