L24000150563

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





300425585583

93/12/24--01035--014 +*150.00





COVER LETTER /

TO: New Filing S Division of C					
SUBJECT: INNOVA	TIVE STATE OF MIND.	LLC			
SOBJECT:		sulting Florida Lin	ited Co	mpany)	_
				nd fees are submitted to accordance with s. 605.1	
Please return all corr	espondence concernin	g this matter to			
Eileen Pennington					
	(Contact Person)		_		
Blalock Walters, P.A.					T.L.
	(Firm/Company)		_		福丰刊
802 11th Street West					
	(Address)		_		
Bradenton, Florida 342	205				SECRETARIOF STATE
((City, State and Zip Code)		_		<u> </u>
epennington@blalockv	valters.com				シャ・ファ
E-mail Address: (to b	e used for future annual re	port notifications)	_		
For further informati	on concerning this ma	tter, please call			
Michael Huckle		_at (<u></u>	748-	0100	
(Name of Cont:	ect Person)	(Area Code	(Da	ytime Telephone Number)	_
	or the following amou a bank located in the	•	proces	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	□S180.00 Filin and Certified Co		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	
Mailing Add New Filing S Division of C P.O. Box 632	ection orporations		New Divis	et Address: Filing Section sion of Corporations Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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.

INNOVATIVE STATE OF MIND, LLC	tely prior to the filing of the Articles of Conversion is:
(Enter Name of Other Bus	iness Entity)
2. The "Other Business Entity" is a Limited Liability Co	
(Enter entity type. Example: corporation, limited	d partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the law	s of
	(Enter state, or if a non-U.S. entity, the name of the country)
10/29/2019 On	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Compar	ny as set forth in the attached Articles of Organization:
INNOVATIVE STATE OF MIND, LLC	
(Enter Name of Florida Limited Li	ability Company)
the date this document is filed by the Florida Depa	eipt or filed date nor more than 90 calendar days after
5. The plan of conversion has been approved in accor	dance with all applicable statutes.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MICLESC	ORGANIZATION FOR	TEORIDA EINITED LIA	DIET I COMI ANI				
ARTICLE I - The name of the	Name: ne Limited Liability Company	vis:					
INNOVATIVE S	STATE OF MIND, LLC						
	(Must contain the words "Limited Li	ability Company, "L.L.C" or "LLC.")					
ARTICLE II The mailing ac		e principal office of the Limit	ed Liability Company is:				
Principal Office Address:		Mailing Address:	Mailing Address:				
802 11th Street	West	13118 State Rd 64, E #353					
Bradenton, Flor	ida 34205	Bradenton, Flroida 34212					
The Limited Liabi business entity wi	I - Registered Agent, Register lity Company cannot serve as its own R th an active Florida registration.) the Florida street address of the florida street	ered Office, & Registered Ag Registered Agent. You must designate at the registered agent arc:	gent's Signature: n individual or another				
	Jenifer S. Schebmri						
	. N	ame					
	802 11th Street West						
	Florida street address (P.O. Box <u>NOT</u> acceptable)					
	Bradenton	FL 34205					
	City	Zip					
liability o registered ag statutes rei	company at the place designate gent and agree to act in this callating to the proper and complete obligations of my position at Registered Agent 5	nd to accept service of process, ed in this certificate, I hereby a spacity. I further agree to compete performance of my duties, as registered agent as provided signature (REQUIRED)	ccept the appointment as ply with the provisions of al and I am familiar with and				

Signed this 31 3t day of January	_2024			
Signature of Authorized Representative of Limited Liability Company:				
Signature of Authorized Representative: Printed Name: Thekesq Huffines	Title:			
Signature(s) on behalf of Other Business Entity: [
Signature: Lucy 1500				
Printed Name: Theresa Huffines	Title: Manager.			
Signature: Printed Name: Sean Huffines				
Printed Name: Sean Huffines	Title: Manager			
Signature				
Signature:Printed Name:	Title:			
Signature:				
Printed Name:	Title:			
Signature:				
Printed Name:	_ Title:			
Signature				
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				

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00 Certified Copy:

Fees:

\$30.00 (Optional) Certificate of Status:

\$5.00 (Optional)