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(Requestor's Name)			
(Address)			
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(Address)			
(City/State/Zip/Phone #)			
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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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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.

(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
08/14/2023 (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: Next Level Tax & Accounting Co. PLLC (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 8th	day of March	20 29
Signature of A	uthorized Depresentative of	
	uthorized Representative of	Limited Liability, Company:
Signature of Au	thorized Representative:	
Printed Name: No	elson M Coressel IV	Title: President
Signature(s) on	behalf of Other Business Enti	ty: [See below for required signature(s)]
Signature:		or gratuit ((3))
Printed Name: Ne		
1/	/	Title: President
Signature:	er	
Printed Name: Ka	itlyn E Coressel	Title: Secretary
Signature:		
Printed Name:		Title:
Printed Name:		
rinted Name,		Title:
Printed Name:		Title:
		1 tite
Signature:		
Printed Name:		Title:
If Florida Corpor	man Vice Ch.	
If Directors or Offi	man, Vice Chairman, Director, of icers have not been selected, an	or Officer.
	eers have not been selected, an	Incorporator must sign.
If Florida Genera	l Partnership or Limited Liab	ility Doutsonk's
Signature of one G	eneral Partner.	micy rartnership:
If Florida Limited	Partnership or Limited Liab	ility Limited Partnership
Signatures of ALL	General Partners.	
All othors		
All others: Signature of an auth	horizo du	
Signature of all auti	iorized person.	
Fees:		
Articles of	Conversion:	\$25.00
	orida Articles of Organization:	\$25.00 \$125.00
Certified Co	opy:	\$30.00 (Optional)
Certificate of		\$5.00 (Optional)
		45.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

of office and the order	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
,	
Next Level Tax & Accounting Co. PLLC	
(Must contain the words "Limited Liability	Company "L. I. C. " H. I. C. "
	Company, L.D.C., of LLC.")
ARTICLE II - Address:	
The maning address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	
	Mailing Address:
9454 Bolero Rd	9454 Bolero Rd
Winter Garden, FL 34787	Winter Garden, FL 34787
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Personal	Office & Desire 14 at 50
	red Agent. You must designate an individual or another
· · · · · · · · · · · · · · · · · · ·	
The name and the Florida street address of the re	gistered agent are:
Nelson M Coressel IV	
Name	
9454 Bolero Rd	
Florida street address (P.O. 1	Box NOT acceptable)
Winter Garden	34797
	<u></u>
City	Zip
Having been named as registered agent and to a	ccept service of process for the above stated limited
The state of the s	IIC CONTITIONED Language 1
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Proper and Continere ner	INTRODUCE Of man destion and I am C at the same
accept the obligations of my position as regis.	tered agent as provided for in Chapter 605, F.S
	~
11/4/2	1 824
Registered Agent's Signatu	ire (REQUIRED)
•	
/CONTINUE	P)
(CONTINUE	(D)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Name and Address:
Nelson M Coressel IV 9454 Bolero Rd Winter Garden, FL 34787
, 22
2824 HA
<u>_</u>
7: 01

Nelson M Coressel IV

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)