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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:





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COVER LETTER

TO:	New Filing Se Division of C				
SUBJI	ECT: <u>New</u>	Beginnings (Name of Res	Title Co	o M () (ted C •π	npany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this matter to:		
		(Contact Person)		-	
NEW	Beginn	(Film/Company)	empany, L	<u>-</u> LL	
801	W Mors	e Blvd Ste (Address)	225	-	
Mint	er Park	City, State and Zip Code)	1	_	
E-m	ail Address: (to b	e used for future annual re	port notifications)	_	
For fu	ther information	on concerning this ma	tter, please call:		
Katil	M(Jain M) (Name of Conta	ct Person)	at (40 7 (Area Code		7-1664 rtime Telephone Number)
		or the following amou a bank located in the	-	process	sed by this office must be payable in US
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	g Fees py	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303

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 Articles of Conversion is: New Beginnings Title Company LLC (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Corporation</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Delawaye
(Enter state, or if a non-U.S. entity, the name of the country)
on 01/23/2020 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
New Beginnings Title Company, 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 21 day of February	_ 20 <u>_ 24</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Kate Printed Name: Katil M(Ginnis	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Vate mcGinnis Printed Name: Katie mcGinnis	Title: CEO
Signature:Printed Name:	
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 of the Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
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:

ARTICLE II - Address:	le (ompany, L.L.C.," or "L.L.C.")
	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
861 N Morse Blvd Ste 225 Winter Park, FL 32789	SUI W Morse Blud Ste 225 Winter Park, FL 32769

Katle McGinnis
Name

The name and the Florida street address of the registered agent are:

Florida street address (P.O. Box NOT acceptable)

Winter Park, FL FL 32789
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)

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

"AMBR" = Authorized Member "MGR" = Manager	
IVICIN — IVIADAPET	
MGR	Katie Williamis
NIGIK.	SUI W Morse Blvd Ste 225
	Winter Park, FL 32767
(Use attachment if necessary)	
	The state of the s
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	3
- Katir McA	an authorized representative of a member
Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware t
Signature of a member or a This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware t
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware t nent to the Department of State constitutes a third degree fel
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