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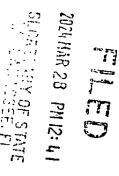
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:

Office Use Only



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08/28/24 -01004--007 **185.00



T. MATTHEWS

APR 11 2024



COVER LETTER

TO:	New Filing S Division of C				
SHRI	JECT: Bann	er Bookkeeping & Consu	ilting, LLC		
.,01,,,		(Name of Res	sulting Florida Lim	ited Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	return all corr	espondence concernin	g this matter to:		
Laura	Banner				
		(Contact Person)		_	
Banne	er Bookkeeping	& Consulting, LLC			
	-	(Firm/Company)		_	
240 E	ider Road				
	 	(Address)		_	
Venic	e, FL 34293				
	(City, State and Zip Code)		_	
Banne	erbookkeep@gn	nail.com			
E-m	nail Address: (to l	oe used for future annual re	port notifications)	_	
For fu	rther informati	on concerning this ma	tter, please call:		
Laura	Banner		_at (ر 738-	0499
	(Name of Cont	act Person)	(Area Code	:) (Day	time Telephone Number)
		for the following amou a bank located in the		process	sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	□S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		S185.00 Filing Fees. Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations 27		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee
	Tallahassee.	FL 32314		2415	N. Monroe Street, Suite 810

Tallahassee, FL 32303

FILED

Articles of Conversion

For

2024 MAR 28 PM 12: 41

"Other Business Entity"

Into

SECRETARY OF STATE

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Banner Bookkeeping & Consulting, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
08/16/2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Banner Bookkeeping & Consulting, 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 2	day of March	20 <u>_ 24</u>
	Authorized Representative of Li	
Signature of Printed Name	Authorized Representative:	Title: Owner
Signature(s)	on behalf of Other Business Entity	[See below for required signature(s)
Signature: _(Printed Name	Laure Banner	Title: Single Owner
Signature: Printed Name	:	Title:
Signature: Printed Name	»:	Title:
Signature: Printed Name	::	Title:
Signature: Printed Name	::	Title:
Signature: Printed Name	::	Title:
	<mark>orporation:</mark> Chairman, Vice Chairman, Director, c r Officers have not been selected, an	
	eneral Partnership or Limited Liab one General Partner.	<u>ility Partnership:</u>
If Florida Li Signatures of	mited Partnership or Limited Liab ALL General Partners.	ility Limited Partnership:
All others: Signature of a	an authorized person.	
Fees:		
Fees Certi	les of Conversion: for Florida Articles of Organization fied Copy: ficate of Status:	\$25.00 : \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY
	2024 MAR 28 PM 12: 41
ARTICLE I - Name:	LULYTIAN
The name of the Limited Liability Company is:	SERVER BY OF STATE SERVER BY OF STATE
Banner Bookkeeping & Consulting, LLC	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
240 Eider Road	240 Eider Road
Venice, FL 34293	Venice, FL 34293
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registerbusiness entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another
Laura Banner	
Name	
240 Eider Rd	
Florida street address (P.O.	
Venice	FL 34293
City	Zip
Having been named as registered agent and to	accept service of process for the above stated limite

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)

ΔR	TI	C1	F	IV-	
Δ				. , -	

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Laura Banner
	240 Eider Road
	Venice, FL 34293
	
(Use attachment if necessary) CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	yon
This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware the unient to the Department of State constitutes a third degree felo
Laura Banner	
T	yped or printed name of signee
•	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)

Common brealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That Banner Bookkeeping & Consulting, LLC is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on August 16, 2021; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

That the limited liability company is current in the payment of all registration fees assessed against it by the Commission pursuant to the Virginia Limited Liability Company Act as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

March 22, 2024

Bernard J. Logan, Clerk of the Commission

Date of this notice: 08-18-2021

Employer Identification Number:

87-2231539

Form: SS-4

Number of this notice: CP 575 G

BANNER BOOKKEEPING & CONSULTING LLC LAURA E BANNER SOLE MBR 1207 CROOKED STICK XING CHESAPEAKE, VA 23320

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 87-2231539. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- Use this EIN and your name exactly as they appear at the top of this notice on all
 your federal tax forms.
- Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is BANN. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.