# 4000205346

(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: 02129 (24)
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<u> </u>

Office Use Only

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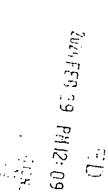


# FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2024

JOHN KNIGHT CALLBLITZ LLC 6168 LUNGO LAGO DRIVE SARASOTA, FL 34241 US

SUBJECT: CALLBLITZ LLC Ref. Number: W24000012131



We have received your document for CALLBLITZ LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

If you have any further questions concerning your document, please call (850) 245-6052.

Crystal S Hightower Regulatory Specialist II CoT

Letter Number: 124A00001635

## **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Call Blitz LLC
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
OHN KNIGHT  (Contact Person)  (Firm/Company)
(Address)
SARASOTA FL 34241  (City, State and Zip Code)  JACK @ CALBLITE. com  E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Name of Contact Person)  (Name of Contact Person)  (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$150.00 Filing Fees (\$25 for Conversion & \$1155.00 Filing Fees and Certificate of Status (\$25 for Articles of Organization)  \$150.00 Filing Fees and Certified Copy (Certified Copy, and Certificate of Status)
Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

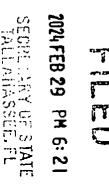
# **Articles of Conversion**

For

# "Other Business Entity"

Into

# Florida Limited Liability Company



The Articles of Conversion <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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (LLC) (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Virginia (VA) (Enter state, or if a non-U.S. entity, the name of the country)
on May 26th, 2022  (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Call Blitz 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.

10+h /1	~ 3
Signed this 12th day of Ochber	20_23
Signature of Authorized Representative of Limit	<del></del>
Wind the state of	11/
Signature of Authorized Representative:	1 / 5
Signature of Authorized Representative: 10HN KNIGHT	Title: Founder & CEU
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)]
Signature: Mhy H	
Printed Name: The Kinischt	Title: FOUNCE ( C.CO
Times rans. And a state of	1 mo
Signature:	
Signature:Printed Name:	Title
Timed Hame.	1800
Signature:	
Printed Name:	Title
Timed Name.	
Signature:	
Signature:Printed Name:	Title
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Signature:	
Signature:Printed Name:	Title
rimed radiic.	_ ride.
Signature:	
Signature: Printed Name:	Title
Timted Name.	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or C	)fficer
If Directors or Officers have not been selected, an Inc	
if Directors of Officers have not been selected, an inc	corporator must sign.
If Florida General Partnership or Limited Liabilit	n Dartnarchin
Signature of one General Partner.	y rattuersuip.
Signature of one General Farther.	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Ourland)
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
OIGO LUNGO LAGO DR SARAJOTA, FL 34241	SARASUTA, FL 34241
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the re	
<u> </u>	(NIGHT PE S
6168 UNGO 1 Florida street address (P.O.	
SARASOTA City	FL 34241
City	Zip
Having been named as registered agent and to	accept service of process for the above stated limited

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)

## ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	JOHN KNIGHT 6169 LUNGE LAGO DR SARASETA, FL 34241
	72 FE
(Use attachment if necessary)	STATI
CLE V: Other provisions, if any.	· · ·
REQUIRED SIGNATURE:	1 State of the sta
This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
JOHN	1 KNIGHT
Ty	ped or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)