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(Requestor's Name)
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(Sity) States Elph North II)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: ELG CONSULTING AND SERV	ICES, LLC		
(Name of Re	sulting Florida Lim	ited Con	ipany)
The enclosed Articles of Conversion, Articles Business Entity" into a "Florida Limited L			
Please return all correspondence concerning	ig this matter to:		
ELEAZAR JIMENEZ			
(Contact Person)		_	
ELEAZAR JIMENEZ		_	
(Firm/Company)			
10025 WEST 32ND LANE		_	
(Address)			
HIALEAH, FLORIDA 33018			
(City, State and Zip Code)		_	
edjr_85@hotmail.com			
E-mail Address: (to be used for future annual re	rport notifications)	_	
For further information concerning this ma	itter, please call:		
ELEAZAR JIMENEZ	at (<u></u>	չ657-8	
(Name of Contact Person)	(Area Code	e) (Day	time Telephone Number)
Enclosed is a check for the following amound dollars and drawn on a bank located in the		process	ed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ■ \$150.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahusson, FL 32314		New I Divisi The C	Address: Filing Section on of Corporations fentre of Tallahassee

Tallahassee, FL 32303

INHS11 (7/17)

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 8.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: ELG CONSULTING AND SERVICES, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Florida Profit 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 [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)
06/07/2024 on
On (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ELG CONSULTING AND SERVICES, 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 26 day of June	20_ 34
Signature of Authorized Representat	tive of Limited Liabi <u>lity Company:</u>
Signature of Authorized Penracentative	. 13.
Signature of Authorized Representative Printed Name: Eleazar Jimenez	Little: Owner
	Time:
Signature(s) on behalf of Other Busine	ess Entity: [See below for required signature(s)]
Signatura	
Signature: Printed Name: Eleazar Jimenez	Title: 0 Wn e/
Trinted (valie,	Title, Own cy
Signature:	
Printed Name:	Title:
61	
Signature:	Title:
Timed Name.	1 ttle:
Signature:	
Printed Name:	Title:
Signature:	Title:
rimed Name:	little:
Signature:	
Printed Name:	Title:
If Florida Corporation:	ore ore
Signature of Chairman, Vice Chairman, E If Directors or Officers have not been sele	Prector, or Officer.
in birectors of Officers have not been sen	ceted, an incorporator must sign.
<u>If Florida General Partnership or Limi</u>	ited Liability Partnership:
Signature of one General Partner.	
ICTL TITLE TO THE TOTAL TO THE	
<u>If Florida Limited Partnership or Limi</u> Signatures of <u>ALL</u> General Partners.	ted Liability Limited Partnership:
organitates of ALL General Farmers.	
All others:	
Signature of an authorized person.	
_	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
ANTIGORES OF CONTENSION.	⊕4J.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION	NFOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE 1 - Name: The name of the Limited Liability Co	ompany is:
ELG CONSULTING AND SERVICES, LI (Must contain the words "Li	LC mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address	ss of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
10025 WEST 32ND LANE HIALEAH FLORIDA 33018	10025 WEST 32ND LANE HIALEAH FLORIDA 33018
	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another in.)
The name and the Florida street addre	ess of the registered agent are:
ELEAZAR JIMENE	ZZ
	Name
10025 WEST 32NI	DLANE
Florida street ad	dress (P.O. Box NOT acceptable)
HIALEAH	33018

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)

City

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = ManagerMGR ELEAZAR JIMENEZ (Use attachment if necessary) ARTICLE V: Other provisions, if any. **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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

S 5.00 Certificate of Status (Optional)

Typed or printed name of signee

ELEAZAR JIMENEZ