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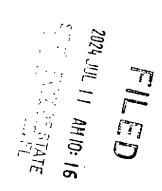
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200432875702

07/11/24--01953--017 **185.00



COVER LETTER

TO: New Filing Sec Division of Cor					
SUBJECT: Vision Con	sulting Team, LLC				1
	(Name of Re	sulting Florida Lin	ited Co	npany)	-
The enclosed Articles of Business Entity" into a	of Conversion, Artic "Florida Limited Li	les of Organiza iability Compar	tion, ar y" in a	nd fees are submitted coordance with s. 60	to convert an "Other 5.1045, F.S.
Please return all corres	pondence concernin	g this matter to			
Michelle René Gordon					
	(Contact Person)		_		
Vision Consulting Team,	LLC				İ
	(Firm/Company)				
4581 Alder Drive	r 2)				
	(Address)	 -	_		1
Port Orange, FL 32127					1
(Cit	y, State and Zip Code)		_		
mtson.vision@gmail.com	• •				
E-mail Address: (to be u	ised for future annual re	port notifications)	_		1
For further information	concerning this mat	tter inlease call:			(
René Gordon		_at (407	.702-9	9797	
(Name of Contact)	Person)	at ()	time Telephone Numbe	
					•
Enclosed is a check for dollars and drawn on a	the following amou bank located in the l	nt: (All checks United States)	process	sed by this office mu	st be payable in US
(\$25 for Conversion as	J\$155.00 Filing Fees nd Certificate of tatus	S180.00 Filing and Certified Co	,	\$185.00 Filing Fees Certified Copy, and Certificate of Status	;
Mailing Addres New Filing Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion porations		New I Divisi The C 2415 I	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, St assee, FL 32303	

INHS11 (7/17)

Articles of Conversion

For

1

"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: Vison Consulting Feam, 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)
10/29/2009 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: Vision Consulting Team, 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_ <i>34</i>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: 7/Liei Printed Name: Michelle René Gordon	Title: Organizer, Registered Agent
Signature(s) on behalf of Other Business Entity:	
Signature: 1) Lie Li L' L' Ga den Printed Name: Michelle René Gordan	Title: Organizer, Registered Agent
Signature:Printed Name:	
Signature: Printed Name:	
Signature: Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Interpretation of Chairman, Director, or If Florida General Partnership or Limited Liabili Signature of one General Partner.	Officer. corporator must sign.
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)

	Name: c Limited Liability Company	.:	
The number of the	c Diffiled Liability Company	15.	
Vision Consulting	g Team, LLC		
	(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II -	Address:		
The mailing ado	dress and street address of the	e principal office of the Limite	d Liability Company is
Principal Offic	e Address:	Mailing Address:	
4581 Alder Drive		4581 Alder Drive	
Port Orange, FL	32127	Port Orange, FL 32127	
			· · · · · · · · · · · · · · · · · · ·
The Limited Liabilit	y Company cannot serve as its own Re	red Office, & Registered Age	ent's Signature:
The Limited Liabilit	- Registered Agent, Registery Company cannot serve as its own Rean active Florida registration.)	red Office, & Registered Age egistered Agent. You must designate an	ent's Signature:
The Limited Liabilit business entity with	y Company cannot serve as its own Re	egistered Agent. You must designate an i	ent's Signature: individual or another
The Limited Liabilit business entity with	y Company cannot serve as its own Re an active Florida registration.)	egistered Agent. You must designate an i	ent's Signature: individual or another
The Limited Liabilit business entity with	y Company cannot serve as its own Re an active Florida registration.) he Florida street address of the Michelle René Gordon	egistered Agent. You must designate an i	ent's Signature: individual or another
The Limited Liabilit business entity with	y Company cannot serve as its own Re an active Florida registration.) he Florida street address of the Michelle René Gordon	egistered Agent. You must designate an i	ent's Signature: individual or another
The Limited Liabilit business entity with	y Company cannot serve as its own Rean active Florida registration.) he Florida street address of the Michelle René Gordon Na 4581 Alder Drive	egistered Agent. You must designate an i	ent's Signature: individual or another
The Limited Liabilit business entity with	y Company cannot serve as its own Rean active Florida registration.) he Florida street address of the Michelle René Gordon Na 4581 Alder Drive	egistered Agent. You must designate an inceregistered agent are:	ent's Signature: individual or another

ted 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..

(CONTINUED)

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)

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

ARTICLE IV-

Company:

COVER LETTER

New Filing Section Division of Corpora	tions		
SUBJECT: Vision Consultin		1	
	(Name of Resulting Florida	Limited Company	
The enclosed Articles of Co. Business Entity" into a "Flor			ted to convert an "Other
Please return all corresponde	-		603.1045, F.S.
Michelle René Gordon		,	ı
(Conta	ct Person)		
VIsion Consulting Team, LLC			
4581 Alder Drive	Company)		
	dress)	_	I
Port Orange, FL 32127			
(City, State a mtson.vision@gmail.com	and Zip Code)	_	
E-mail Address: (to be used for f	If the annual		
For further information concer	nine Ali		
René Gordon		:	
(Name of Contact Person)	at (407	702-9797 C) (Daytime Telephone Number	
Enclosed is a check for the folk follars and drawn on a bank loo	· · · · · · · · · · · · · · · · · · ·	processed by this office mu	') st be payable in US
3 \$150.00 Filing Fees 525 for Conversion 2 \$125 for Articles 5 Corganization)	Filing Fees	Fees \$185.00 Filing Fees, Certified Copy, and Certificate of Status	20
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	;	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303	THE RED TATE

Articles of Conversion

For

"Other Business Entity"

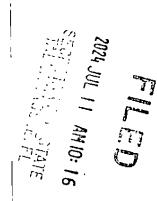
Into

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

•	5, 1101lda
 The name of the "Other Business En Vison Consulting Team, LLC 	tity" immediately prior to the filing of the Articles of Conversion is:
	and of the Articles of Conversion is:
(Enter Nai	me of Other Business Entity)
2 The "Other Division in the limit	- delicas Emity)
2. The "Other Business Entity" is a limit	ed liability company
(Enter entity type, Example: co-	poration, limited partnership, general partnership, common law or business trust, etc.)
The state of the s	poration, limited partnership, general partnership
First organized formed and	partnership, common law or business trust etc.)
First organized, formed or incorporated u	Inder the laws of Georgia
	110 IAW3 0[
10/29/2009	(Enter state, or if a non-U.S. entity, the name of the country)
on_	of the country)
(date of organization, formation or incorporat	
tornation or incorporat	ion)
3. The name of the run.	lity Company as set forth in the attached Articles of Organization:
and name of the Florida Limited Liabil	lity Common
Vision Consulting Team 44.0	company as set forth in the attached Articles and
	Articles of Organization:
(E-1)	
(Enter Name of Floric	la Limited Liability Company)
4 If not offered	
4. If not effective on the date of filing, enter (The effective date: Cannot be prior to d	97 th = 50 - 1 06/26/2024
(I ne effective date: Cannot be prior to	the effective date:
The date this do-	ate of receipt or filed a
the date this document is filed by the Flo Note: If the date inserted in this block does not med document's effective details.	ate of receipt or filed date nor more than 90 calendar days after
document's effective in this block does not med	if the annihilation of State.)
seriective date on the Department of Stat	e's records
S TL 1	rida Department of State.) et the applicable statutory filing requirements, this date will not be listed as the e's records.
5. The plan of conversion has been approved	
approved	In accordance with all and in the
The NO	ar applicable statutes

- 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.



Q'	·	
Signed this 26 day of June	20.24	
Signature of Authorized Representative	20 31	
Signature of A. II	01 Limited Liability Company:	
Printed Name: Michelle René Gordon	Lielell Press Garden	
Signature(s) on behalf of Other Business En	Title: Organizer, Registered A	gent
Signature: 10 and 10 an	ntity: [See below for required signatu	re(s))
Signature: 19 Lie Lie Cordon Printed Name: Michelle René Gordon Signature:	eidore	(0)
	Title: Organia	ent
Signature:Printed Name:		
	Tiel	
Signature: Printed Name:	1	
Printed Name: Signature:	Title:	
Oignature.		
	litle:	
Signature:		
Printed Name:	Trial and the second	
Printed Name: Signature:	I itle:	
Signature: Printed Name:		
	Title:	
Signature of Chairman		
Signature of Chairman, Vice Chairman, Director, If Directors or Officers have not been selected, an	or Officer.	
vii sciccieti an	Incom	
If Florida General Partnership or Limited Liab Signature of one General Partner.	ility Partnership:	
If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners.	Hity Limited Base	
All others:		
Signature of an authorized person.		
Fees:		1 59 124
Articles of Conversion:		60-
rees for Florida Articles - co	\$25.00	
Certified Copy: Certificate of Status:	\$125.00 \$30.00 (Optional)	
Status;	\$5.00 (Optional)) H
	• • • • • •	1

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ARTICLES OF ORGANIZATION	FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Cor	mpany is:
Vision Consulting Team, LLC	l .
(Must contain the words "Lim	
	ited Liability Company, "L.L.C.," or "LLC.")
Principal Office Address:	of the principal office of the Limited Liability Company is:
4581 Alder Drive	Mailing Address:
Port Orange, FL 32127	4581 Alder Drive Port Orange, FL 32127
the Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Michelle René Gordon	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another f the registered agent are:
	Name
4581 Alder Drive	
Florida street address	(DO D
	(P.O. Box <u>NOT</u> acceptable)
City Having been named as region.	Zip
accept the obligations of my position as	nd to accept service of process for the above stated limited and in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S.
Registered Agent's Si	gnature (REQUIRED)
Ç 0 5 <u>1</u>	gnature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR	Michelle René Gordon	
	4581 Alder Drive	1
	Port Orange, FL 32127	1
		
		<u></u>
		<u> </u>
(Use attachment if necessary)		108 107 108 107 108 107
LE V: Other provisions, if any.		TATE FL
		<u> </u>
REQUIRED SIGNATURE:		
- Theficelle Piene	Gardon	
Signature of a member or	an authorized representative of a	member
any false information submitted in a docur as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida State ment to the Department of State constitutes	ites. I am aware that a third degree felony
Michelle René Gordon		1

ARTICLE IV-