124000397657

(Re	equestor's Name)	
(Ad	idress)	
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(Cit	ty/State/Zip/Phone	e #)
<u></u>	₩AIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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11/

COVER LETTER

SUBJECT: BAR	PUCHI & ASS	SOCIATES	LLL		
	(Name of Res	ulting Florida Limited Con	npany)		
			d fees are submitted to c ccordance with s. 605.10		
Please return all corre	espondence concerning	g this matter to:			
Claudia S	UAREZ				
BARUCHI	(Contact Person) ASSOCIA	TES		20 20	2024
	(Firm/Company)	SUITE 3	70		2024 SEP -3 AM 10: 5
ST PETER	,	L, 33702	-	11 (12 %) 11 (13 %)	H 10: 1
CPS. CM.	DMCGMAI	L.COM		H. T.	51
	e used for future annual rep	,			
	on concerning this mat	ter, please call: at (561) 7 (Area Code) (Day	597972		
(Name of Contact	ct Person)	(Area Code) (Day	time Telephone Number)		
Enclosed is a check for dollars and drawn on	or the following amou a bank located in the I	nt: (All checks process United States)	sed by this office must be	e payabl	e in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Addr New Filing Se			Address: Filing Section		

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

New Filing Section Division of Corporations

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

Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: BARUCHI* ASSOCIATES LLC DOC# M2100008979 (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a 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 <u>Delaware</u> (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)
on 5/13/2020 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BARUCHI & ASSOCIATES LLC
BARUCHT & ASSOCIATES 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.
2024 SEP. SECRETARY

Signed this 28th day of August	_20 <u>_24</u>
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Printed Name: CLAUDIA SUAREZ	aluest
Printed Name: (1-Aud) A Supple 2	Title: MG-R
Timed Name. Common Common Line	Title.
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Chuncheld	
Printed Name: CLAUDIA SUAKEZ	Title: NA
Timed Name. Corva Original Out the Co	
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title
Timed Name.	_ Title
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Tr'. 1
Printed Name:	little:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	0.00
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
in Directors of Officers have not been selected, an in-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fage	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

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

Certified Copy: Certificate of Status: 1024 SEP -3 AM 10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BARUCHI \$	ASSOCIATES

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

ST PETERS BURG FL

Mailing Address:

7901 4th 5, N STE 300 ST PETERS BURG FL 33702

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Claudia Suarez
Name

7901 4th ST, N STE 300

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

ST PETERSBURG FL 33702

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)



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 "MGR" = Manager	Claudia Suarez
	2024 SEP - 3 SECRETES LALLA 1/2
(Use attachment if necessary)	MHIO: 51
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	marpular "
Signature of a member or a	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

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)