L24000410267

(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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09/18/24--01031--007 **150.00

SEERLIARY OF STATE TALLAHASSEE, FLORIDA

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 Statutes.

(Enter Name of Other	Business Entity)	
limited liability of	ompany	
	ited partnership, general partnership, common law or business trust, etc	٤.)
First organized, formed or incorporated under the l	thus of(Enter state, or if a non-U.S. entity, the name of the country)	
4/30/2021	(Time) state, or if a non-our, entity, the finite of the commity	
on (date of organization, formation or incorporation)		
3. The name of the Florida Limited Liability Comp	pany as set forth in the attached Articles of Organization:	:
Ready, Willing, & Abel, LLC		
(Enter Name of Florida Limited	Liability Company)	
the date this document is filed by the Florida De	eceipt or filed date nor more than 90 calendar days after partment of State.) licable statutory filing requirements, this date will not be listed as the	r
5. The plan of conversion has been approved in acc	ordance with all applicable statutes.	
 The "Converted or Other Business Entity" has agree which such members are entitled under ss. 605.10 		ŀ
	THE E	

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Signed this 13th day of Septen be	20 24 <u>.</u>
Signature of Authorized Representative of I	<u> Limited Liability Company:</u>
/i/	1 111
Signature of Authorized Representative: <u>U</u> Printed Name: Abel Henson	her Herbon
Printed Name: Abel Henson	Title: AMBR
Signature(s) on behalf of Other Business Enti-	ty: [See below for required signature(s)]
Signature: Med Henson Printed Name: Abel Henson	<u> </u>
Printed Name: Abel Henson	Title: AMBR
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
o.	
Signature:Printed Name:	'E'AL.
rimed name:	11uc:
Signature:	
Signature:Printed Name:	Title:
Simultura	
Signature:Printed Name:	Title
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director	, or Officer.
If Directors or Officers have not been selected, a	n Incorporator must sign.
If Florida General Partnership or Limited Lia	ability Partnership
Signature of one General Partner.	ionity 1 artifership.

If Florida Limited Partnership or Limited Liability Limited Partnership:

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Signatures of ALL General Partners.

Signature of an authorized person.

Certified Copy: Certificate of Status:

Articles of Conversion:

Fees for Florida Articles of Organization:

All others:

Fees:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	v:				
Ready, Willing, & Abel, LLC					
(Must contain the words "Limited Liabili	ity Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
1990 Main Street. Ste 750	1990 Main Street. Ste 750				
Sarasota, FL 34236	Sarasota, FL 34236				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the a	stered Agent. You must designate an individual or another				
Abel Henson Name					
Nami	.c				
1990 Main Street, Ste 750	N.D. NOT				
Florida street address (P.O					
Sarasota	FL ³⁴²³⁶				
City	Zip				
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	n this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chipper 608 F.S.				
(CONTIN	ASSEE FLORIDA NUED)				

A	RI	\mathbf{r}_{10}	F.	11	7.

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	Abel Henson	
	1990 Main Street, Ste 750	_
	Sarasota, FL 34236	_
		_
		_
		_
		
		_
		_
		_
(Use attachment if necessary)		
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	17	
TICLE V: Other provisions, if any.	- Tr √List	2024 SEP
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	M-,	
REQUIRED SIGNATURE:	7	P
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		_ 0 3

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.

Abel Henson		

Typed or printed name of signce

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)