# L24000419072

| (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: |
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SLURE WRY OF STATE TALLAHASSEE, FLORIDA

### **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 E<br>THE SMALL THINGS CONSULTANCY, I       | intity" immediately prior to the filing of the Articles of Conversion is:   |
|---|---|
|   | Name of Other Business Entity)  |
| 2. The "Other Business Entity" is a   | Limited Liability Company   |
| (Enter entity type. Example: c  | corporation, limited partnership, general partnership, common law or business trust, etc.)                              |
| First organized, formed or incorporate  | d under the laws of   |
| 06/06/2023<br>on  |   |
| (date of organization, formation or incorp                                    | oration)  |
| 3. The name of the Florida Limited Li THE SMALL THINGS CONSULTANCY, I         | iability Company as set forth in the attached Articles of Organization:   |
| (Enter Name of  | Florida Limited Liability Company)  |
| (The effective date: Cannot be prior<br>the date this document is filed by th | of meet the applicable statutory filing requirements, this date will not be listed as the                               |
| 5. The plan of conversion has been app  | proved in accordance with all applicable statutes.  |
|   | thity" has agreed to pay any members having appraisal rights the amount to der ss. 605.1006 and 605.1061-605.1072, F.S. |

| Signed this 13th day of September   | 20 24.   |                                     |                     |      |
|---|--|-------------------------------------|---------------------|------|
| Signature of Authorized Representative of Limi  | ted Liability Company:   |                                     |                     |      |
| Signature of Authorized Representative: Printed Name: James Small   | / Title: Member  |                                     |                     |      |
| Signature(s) on behalf of Other Business Entity: [  |  |                                     |                     |      |
| Signature:  | Title: Member  |                                     |                     |      |
| Signature:Printed Name:   |  |                                     |                     |      |
| Signature:Printed Name:   | Title:   |                                     |                     |      |
| Signature:Printed Name:   |  |                                     |                     |      |
|   |  |                                     |                     |      |
| Signature:Printed Name:   | Title:   |                                     |                     |      |
|   |  |                                     |                     |      |
| Signature: Printed Name:  | _ Title:   |                                     |                     |      |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. |  |                                     |                     |      |
| If Florida General Partnership or Limited Liabilit<br>Signature of one General Partner.                             | y Partnership:   |                                     |                     |      |
| If Florida Limited Partnership or Limited Liabilit<br>Signatures of <u>ALL</u> General Partners.                    | y Limited Partnership:   |                                     |                     |      |
| All others: Signature of an authorized person.  |  | <del>, -</del> 1                    |                     |      |
| Fees:   |  | all'A                               | 262 <b>4</b> S      | ** * |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:           | \$25.00<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) | VEIGRY OF STATE<br>VIASSEE, FLORIDA | 2024 SEP 24 PM 2: 0 |      |
|   |  | ¥(                                  | =                   |      |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:   |   |
|---|---|
| THE SMALL THINGS CONSULTANCY, LLC   |   |
| (Must contain the words "Limited Liability  | y Company, "L.I.,C.," or "LLC.")                    |
| ARTICLE II - Address:   | incipal office of the Limited Liability Company is: |
| Principal Office Address:   | Mailing Address:                                    |
| 5739 Bent Pine Square   | 5739 Bent Pine Square                               |
| Vero Beach, FL 32967  | Vero Beach, FL 32967                                |
| business entity with an active Florida registration.)  The name and the Florida street address of the re  James Small | egistered agent are:                                |
| Name  |   |
| 5739 Bent Pine Square   |   |
| Florida street address (P.O.  | Box NOT acceptable)                                 |
| Vero Beach  | FL 32967  |
| City  | Zip   |
| registered agent and agree to act in this capacity statutes relating to the proper and complete pe                    |   |

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

| HARADON A J. LAKE I  | Name and Address:  |
|--|--|
| "AMBR" = Authorized Member   |  |
| "MGR" = Manager<br>AMBR  | James Small  |
| AMOIN  | 5739 Bent Pine Square  |
|  | Vero Beach, FL 32967   |
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| CLE V: Other provisions, if any.   | <u> </u>   |
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| LE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or   | ANASSEE, FLORING OR A members.   |
| REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance.   | an authorized representative of a member of a ware that ware that  |
| REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document is a submitted in a document is executed in accordance any false information submitted in a document is executed in accordance any false information submitted in a document is executed in accordance any false information submitted in a document is executed in accordance any false information submitted in a document is executed in accordance and the submitted in a document is executed in accordance and the submitted in accordance and the submitted in a document is executed in accordance and the submitted in a document is executed in accordance and the submitted in a document is executed in accordance and the submitted in accord | ANASSEE, FLORING OR A members.   |
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| REOUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  James  | an authorized representative of a member of a with section 605.0203 (1) (b), Florida Statutes. I am aware that ament to the Department of State constitutes a third degree feloneses Small |
| REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  James  | an authorized representative of a member of with section 605.0203 (1) (b), Florida Statutes, I am aware that ament to the Department of State constitutes a third degree felon             |

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