00468426

(Rec	questor's Name)	
(Add	ress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	





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CORPORATE ACCESS,

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INC.

236 Fast 6th Avenue. Tallahassee, Florida 32303

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(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	CERTIFIED COPY	
ΚX	РНОТОСОРУ	
	CUS	
ΚX	FILING	CONVERSION
F	ULTON AGENCY, I	NC.
(C	ORPORATE NAME AND DO	CUMENT #)
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(C	ORPORATE NAME AND DO	CUMENT #)
		CLIMENT #)
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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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: FULTON AGENCY, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
November 02, 1989 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:
FULTON AGENCY, 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.

FILED

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SECRETABLY OF STATE

Signed this 6th day of November	2024
Signature of Authorized Representative of Lim	ted Liability Company:
Signature of Authorized Representative: Fold	10 lett
Signature of Authorized Representative: Fold	_Title:Managar
Signature(s) on behalf of Other Business Entity:	
Signature: MA G kell	•
Signature: MAN G kell	mt . D. vidaa
Printed Name: Robert Sistrunk	Title: President
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Printed Name:	ride:
Signature:Printed Name:	<u> </u>
Printed Name:	Title:
Signature:	
Printed Name:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
10 mm 11 d 11 11 11 11 11 11 11 11 11 11 11 1	to Danta and I to
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnersmer
Signature of one General Farmer.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
rees for Florida Afficies of Organization.	•
Certified Copy:	\$30.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:		
FULTON AGENCY, LLC (Must contain the words "Limited Lial	Lilien Company "	LIC "or HIC	27)
(Must contain the words "Limited Liai	minty Company,	L.L.C., OF TALC.	• 9
ARTICLE II - Address: The mailing address and street address of the	: principal off	ice of the Lin	nited Liability Company is:
Principal Office Address:	Mailing	Address:	
660 E Hillsboro Boulevard	660 E I	Hillsboro Bou	ilevard
STE 105	STE 5		
Deerfield Beach, FL 33441	Deerfield	d Beach, FL 33	3441
husiness entity with an active Florida registration.) The name and the Florida street address of the Robert Sistrunk		igent are:	_
Na	ame		
660 E Hillsboro Boulev			-
Florida street address (F	O. Box <u>NO</u>	Γ acceptable)	
Deerfield Beach	FL	33441	_
City		Zip	_
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as Registered Agent's S	d in this certificacity. I furthe the performance registered age	icate, I hereby er agree to co e of my dutie. ent as provide	eaccept the appointment as imply with the provisions of all s, and I am familiar with and

(CONTINUED)

Title:	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager MGR	Robert Sistrunk
	660 E Hillsboro Boulevard, STE 105
	Deerfield Beach, FL 33441
MGR	Joaquin Veloz
	660 E Hillsboro Bouleyard, STE 105
	Deerfield Beach, FL 33441
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member or	ment to the Department of State constitutes a third degree f
Signature of a member or This document is executed in accordance any false information submitted in a docu	with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree f
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s. \$47.1324.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree f
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.&47.1324.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree f

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

ARTICLE IV-