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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: 05/3/124 |
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COVER LETTER

| TO: New Filing Sec Division of Cor | | | | | | |
|--|--|--------------------------------------|----------------------------------|--|--------------------|--|
| SUBJECT: Tolle Web | Design | | | | | |
| Sobolett. | (Name of Resu | alting Florida Lim | ted Com | ipany) | | |
| The enclosed Articles of Business Entity" into a | | | | | | |
| Please return all corresp | pondence concerning | this matter to: | | | | |
| Branden Tolle | | | | | | |
| | (Contact Person) | | _ | | | |
| Tolle Web Design | | | | | | |
| | (Firm/Company) | | _ | | | |
| 7266 Amethyst Ave | | | | | | |
| | (Address) | | _ | | | |
| Grant Valkeria, FL, 3294 | 9 | | | | | |
| (Cit | y, State and Zip Code) | | | | | |
| branden@tollewebdesigr | n.com | | | | | |
| E-mail Address: (to be a | used for future annual rep | port notifications) | _ | | | |
| For further information | concerning this mat | ter, please call: | | | | |
| Branden Tolle | | _at (⁶⁰⁹ | 807-8 | 8655 | | |
| (Name of Contact | Person) | (Area Code |) (Day | time Telephone Number) | _ | |
| Enclosed is a check for dollars and drawn on a | • | • | process | ed by this office must | be payable in US | |
| (\$25 for Conversion a | \$155.00 Filing Fees and Certificate of Status | □\$180.00 Filing and Certified Co | | ☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status | | |
| Mailing Address New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL | tion porations | | New I Divisi The C 2415 | Address: Filing Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suitassee, FL 32303 | 2024 DEC 27 FH 12: | |

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.

| Tolle Web Design LLC |
|--|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) |
| (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) |
| 15, march, 2017 on |
| 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: |
| Tolle Web Design 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 6 day of April | |
|---|--|
| Signature of Authorized Representative of Limi | ted Liability Company: |
| Signature of Authorized Representative: 2. S. Printed Name: Branden Tolle | Title: Owner |
| Signature(s) on behalf of Other Business Entity: | [See below for required signature(s)] |
| Signature: Branden Talls | _Title: Owner (100%) |
| Signature:Printed Name: | |
| Printed Name: | Title: |
| 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 If Directors or Officers have not been selected, an Inc. | |
| If Florida General Partnership or Limited Liabili Signature of one General Partner. | ty Partnership: |
| If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. | |
| 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) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | |
|---|--|--|
| The name of the Limited Liability Company is | 5: | |
| | | |
| Tolle Web Design LLC | Uni C 11 1 C 7 11 1 C 7 | |
| (Must contain the words "Limited Liabil | itty Company, "L.E.C., or "LLC.) | |
| ARTICLE II - Address: | | |
| The mailing address and street address of the | principal office of the Limite | ed Liability Company is: |
| Principal Office Address: | Mailing Address: | |
| 7266 Amethyst Ave | 7266 Amethyst Ave | |
| Grant Valkeria | Grant Valkeria | |
| FL 32949 | FL 32949 | |
| (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the | | individual or another |
| Pronden Talla | | |
| Branden Tolle Nan | ne | |
| | | |
| 7266 Amethyst Ave | O. D NOT | |
| Florida street address (P. | | |
| Grant Valkeria | FL 32949 | |
| City | Zip | |
| Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as referenced Registered Agent's Signature. | in this certificate, I hereby ac acity. I further agree to comp e performance of my duties, a egistered agent as provided for | ccept the appointment as oly with the provisions of all and I am familiar with and |
| | | 10 |

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: |
|--|------------------------------------|
| "MGR" = Manager | Branden Tolle 7266 Amethyst Ave |
| | Grant Valkaria 32949 |
| | |
| | |
| | |
| (Use attachment if necessary) | |
| FICLE V: Other provisions, if any. | . ~ |
| | 121 OFC 27 |
| REQUIRED SIGNATURE: | 527 PM |

. .

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)

Typed or printed name of signee

Branden Tolle