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(Document Number)	
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Office Use Only



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#### December 30, 2024

Please find enclosed the corrected documents for the conversion of I Squared Consulting, LLC. Ref. Number: W24000122529

Thank you for your assistance with this matter

Kirk Dominick

Managing Member

I Squared Consulting, LLC

T: 252-402-6182

E: kirk@i2consulting.org



December 9, 2024

KIRK DOMINICK I SQUARED CONSULTING, LLC 1219 YATES STREET ORLANDO, FL 32804 US

SUBJECT: I SQUARED CONSULTING, LLC.

Ref. Number: W24000122529

We have received your document for and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham Supervisor New Filings Section

Letter Number: 724A00026623



# FLORIDA DEPARTMENT OF STATE Division of Corporations

August 28, 2024

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KIRK DOMINICK I SQUARED CONSULTING, LLC 1219 YATES STREET ORLANDO, FL 32804 US

SUBJECT: I SQUARED CONSULTING, LLC.

Ref. Number: W24000122529

We have received your document for I SQUARED CONSULTING, LLC. and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Crystal S Hightower Regulatory Specialist II

Letter Number: 124A00019387

#### 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: I Squared Consulting. 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.
First organized, formed or incorporated under the laws of North Carolina
(Enter state, or if a non-U.S. entity, the name of the country)
on April 3, 2012
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
I Squared Consulting, 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 8	day of August	20. 24
Signature of Author	rized Representative of Limi	ited Liability Company:
Signature of Authoric	zed Representative:	Til J. )
Printed Name: Kirk Do	minick	Title: Managing Member
		[See below for required signature(s)]
Signature:\		Title: Managing Mender
Printed Name: Kil	E Dominick	Title: Managing Mereler
		· ·
Signature:		Title:
rimed Name.		Title.
Signature:		
Printed Name:		Title:
Printed Name:	<u></u>	Title:
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Signature:		
Printed Name:		Title:
Signatura		
Printed Name:		
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If Florida Corporation		
	n, Vice Chairman, Director, or	
it Directors or Officer	rs have not been selected, an Inc	
If Florida General P	artnership or Limited Liabili	ty Partnership:
Signature of one Gene		12.
_		Fig. 1
	artnership or Limited Liabilit	ty Limited Partnership:
Signatures of ALL Ge	eneral Partners.	
All others:		
Signature of an author	rized person.	
· · ·	م مسجو <u>سینی یا .</u>	
Fees:		
Articles of Co	onversion:	\$25.00
<del>-</del>	da Articles of Organization:	\$125.00
Certified Cop	-	\$30.00 (Optional)
Certificate of	•	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Squared Consu					
	(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")			
ARTICLE II -	Address:				
The mailing add	dress and street address of the	principal office of the Limit	ted Liab	ility C	ompar
Principal Offic	e Address:	Mailing Address:			
1219 Yates Stree	et	1219 Yates Street			
Orlando FL 3280	)4	Orlando FL 32804			
	- Registered Agent, Registe				
(The Limited Liabilit business entity with	ey Company cannot serve as its own Rean active Florida registration.)  the Florida street address of the Kirk Dominick  Na	egistered Agent. You must designate a		ignati	
(The Limited Liabilit business entity with	ty Company cannot serve as its own Re an active Florida registration.)  the Florida street address of the Kirk Dominick  No. 1219 Yates Street	egistered Agent. You must designate a ne registered agent are:		ignati	
(The Limited Liabilit business entity with	ty Company cannot serve as its own Re an active Florida registration.)  the Florida street address of the Kirk Dominick  No. 1219 Yates Street	egistered Agent. You must designate a		ignati	
(The Limited Liabilit business entity with	ty Company cannot serve as its own Re an active Florida registration.)  the Florida street address of the Kirk Dominick  No. 1219 Yates Street	egistered Agent. You must designate a ne registered agent are:		ignati	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

**ARTICLE IV-**

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Kirk Dominick	
	1219 Yates Street	
	Orlando FL 32804	
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(Use attachment if necessary)		
LE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
Signature of a member of	r an authorized representative of a men	 1ber
This document is executed in accordance	r an authorized representative of a men ce with section 605.0203 (1) (b). Florida Statutes. I nument to the Department of State constitutes a thir	am aware

Kirk Dominiek

Typed or printed name of signee

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)