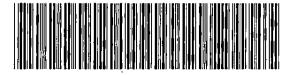


(Requestor's Name)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u></u>

Office Use Only



500445985845

04/01/25--01026--019 **150.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2025

FELIPE BROWN 601 NE 36 ST, APT 2508 MIAMI, FL 33137 US

SUBJECT: B&B BOOKKEEPING LLC

Ref. Number: W25000061987

8/21/25

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

Please accept our apology for failing to mention this in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L24000381649.

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.

Jazmine N Ardley Regulatory Specialist II

Letter Number: 925A00009668

COVER LETTER

TO: New Filing Section Division of Corporati	ons				
				'	
SUBJECT: B&B TCX S					
	(Name of Resul	lting Florida Lim	i tc d Con	npany)	
The enclosed Articles of Con Business Entity" into a "Flor	version, Article ida Limited Lia	s of Organizat bility Compan	tion, and	nd fees are submitted to convert an "Othe accordance with s. 605.1045, F.S.	er
Please return all corresponde	nce concerning	this matter to:			
FELIPE BROWN				j	
(Conta	ct Person)		_		
B&B BOOKKEEPING LLC					
(Firm/0	Company)		_		
601 NE 36 ST, APT 2508				1	
(Λα	idress)		_		
MIAMI, FL 33137					
(City, State	and Zip Code)		_	i	
INFO.BOOKSBYBB@GMAIL.C	ОМ				
E-mail Address: (to be used for	future annual repo	rt notifications)	_		
For further information conce	erning this matte	er, please call:			
JOSEPH BARBUTO		at (⁹⁷⁸	չ596-8	8440	
(Name of Contact Person)) (Dayı	rtime Telephone Number)	
Enclosed is a check for the fo dollars and drawn on a bank l	llowing amount ocated in the U	: (All checks nited States)	process	sed by this office must be payable in US	
		□\$180.00 Filing and Certified Co		S185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314			New F Division The Co	t Address: Filing Section	

Tallahassee, FL 32303

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.

Statutes.	1
1. The name of the "Other Business Entity" immediately prior to the B&B BOOKKEEPING LLC	filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, generation, limited partnersh	
	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
First organized, formed or incorporated under the laws of	f a non-U.S. entity, the name of the country)
01/01/2023 on .	, a non ene ene, , , , , , , , , , , , , , , ,
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in	the attached Articles of Organization:
B&B Tax Solutions	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 dat the date this document is filed by the Florida Department of Stat Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	e.)
5. The plan of conversion has been approved in accordance with all a	pplicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any mem which such members are entitled under ss. 605.1006 and 605.1061-60	
	2020 113 21

Signed this 31ST day of JANUARY	2025
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Feb. 195 appearance of Authorized Representative:	Title: MEMBER
Printed Name: FELIPE BROWN	Title: MEMBER
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Fund # Sour	·
Printed Name: Felipe Brown	Title: Member
1 . /	Title: Premot
Signature: Jeup Druy	
Signature: Juny Sony Printed Name: Joseph Barbuto	Title: Member 1
Signature:	
Printed Name:	Title:
Signatura	4
Signature:Printed Name:	Title:
Timod Mario.	Title.
Signature:	,
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Councustions	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or or	Officer
If Directors or Officers have not been selected, an Inc	
The state of the state and the second, an are	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:
Signatures of ALL General Partners.	
All othors	
All others: Signature of an authorized person.	
Signature of all authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LÍABILITY COMPANY

The name of the Li	imited Liability Company	is:
<u> </u>	B & B	Tax Solutions LLC
(Mu		ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Ad	ldress:	1
		principal office of the Limited Liability Company
Principal Office A	Address:	Mailing Address:
601 NE 36 ST, APT	2508	601 NE 36 ST, APT 2508
MIAMI, FL 33137		MIAMI, FL 33137
MIAMI, FL 33137		MIAMI, FL 33137
ARTICLE III - Re	egistered Agent, Registe ompany cannot serve as its own Roactive Florida registration.)	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - Re (The Limited Liability Co business entity with an a	ompany cannot serve as its own Re	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - Re (The Limited Liability Co business entity with an a	ompany cannot serve as its own Roactive Florida registration.) Florida street address of the	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - Re (The Limited Liability Co business entity with an a	ompany cannot serve as its own Roactive Florida registration.)	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
ARTICLE III - Re (The Limited Liability Co business entity with an a	ompany cannot serve as its own Reactive Florida registration.) Florida street address of the FELIPE BROWN Na	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
ARTICLE III - Re (The Limited Liability Co business entity with an a	ompany cannot serve as its own Reactive Florida registration.) Florida street address of the FELIPE BROWN Na 601 NE 36 ST, APT 2508	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
ARTICLE III - Re (The Limited Liability Cobusiness entity with an a	ompany cannot serve as its own Reactive Florida registration.) Florida street address of the FELIPE BROWN Na 601 NE 36 ST, APT 2508	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: O. Box NOT acceptable)
ARTICLE III - Re (The Limited Liability Cobusiness entity with an a	ompany cannot serve as its own Reactive Florida registration.) Florida street address of the FELIPE BROWN Na 601 NE 36 ST, APT 2508 Florida street address (P	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
AMBR	FELIPE BROWN	
	601 NE 36 ST, APT 2508	
	MIAMI, FL 33137	
AMBR	JOSEPH BARBUTO	
	2 CHERRY STREET	<u> </u>
	HINGHAM, MA 02043	
-		
	-	5.
		<u>د.</u>
(Use attachment if necessary)		10
ARTICLE V: Other provisions, if any.		
		n, C
REQUIRED SIGNATURE:		
Frank		
		
S:		
This document is executed in accordance	an authorized representative of a	member

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.

Felipe Brown
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) S 5.00 Certificate of Status (Optional)