L21000233483

(Requestor's Name)
(Address)
(Address)
(1001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
• • •
(Document Number)
(Localitent Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200363597582

04/13/21--01021--023 **150.00

8551 W. Sunrise Blvd., Ste 300 Plantation, FL 33322



3511 W. Commercial Blvd., Ste 304 Fort Lauderdale, FL 33309

> TEL: 954.315.1155 FAX: 954.452.3311

April 2, 2021

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear representative,

Please find enclosed articles of conversion for Grant & Associates, LLC. We have found a Grant & Associates, LLC filing on Sunbiz but that was rejected; however, Sunbiz shows that it is active. We have enclosed copies of the Sunbiz status and the rejection for your ease of reference. We are requesting that the 2014 filing be made inactive and allow our conversion filing to be the sole Grant & Associates, LLC in Florida.

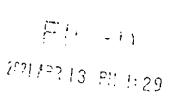
If you are unable to accommodate our request, please advise so that we may choose an alternative name for the LLC conversion.

Thank you kindly for your cooperation and attention to this matter, it is much appreciated.

Best regards,

Tania Bartolini, Esq.

COVER LETTER



	ng Section of Corporations					
SUBJECT: Gra	nt & Associates Private Equit	ty Solutions LLC				
(Name of Resulting Florida Limited Company)						
				d fees are submitted to convert an "Othe eccordance with s. 605.1045, F.S.		
Please return all	correspondence concernin	ig this matter to:				
Tania Bartolini						
	(Contact Person)					
Salas Law Firm, F	'. A .					
	(Firm/Company)					
3511 W Commerc	ial Blvd., Suite 304					
	(Address)					
Fort Lauderdale,	FL 33309					
	(City, State and Zip Code)					
tania@salaslawfir	mpa.com					
E-mail Address	(to be used for future annual re	eport notifications)				
For further infor	mation concerning this ma	atter, please call:				
Tania Bartolini			368-4			
(Name of	Contact Person)	(Area Code)	(Day	rtime Telephone Number)		
	eck for the following amount on a bank located in the		rocess	sed by this office must be payable in US		
\$150.00 Filing F (\$25 for Conversion & \$125 for Articles of Organization)		□\$180.00 Filing and Certified Cop		S185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailina	A ddman.		C4			

Mailing Address:
New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

1711 P. 1:29

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: Grant & Associates Private Equity Solutions LLC
(Enter Name of Other Business Entity)
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)
5/6/2010 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:
Grant & Associates Private Equity 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 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 2vol day of 40vl	20				
Signature of Authorized Representative of Limited Liability Company:					
Signature of Authorized Representative: Printed Name: Jeffrey S. Grant Title: MGR					
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]					
Signature:	Title: MGR				
Timed Tuning To The Time To Th					
Signature:Printed Name:					
Printed Name:	Title:				
Signature:					
Signature:Printed Name:	Title:				
Signature:Printed Name:	Tislo				
(Timed Raine,					
Signature:					
Signature: Printed Name:	_ Title:				
Cimatura					
Signature:Printed Name:	Title:				
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.					
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.					
If Florida Limited Partnership or Limited Liability Limited Partnership: 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 2017 10 13 PM 1: 29			
ARTICLE I - Name:	. 29			
The name of the Limited Liability Com	npany is:			
Grant & Asssociates Private Equity Solution	ons LLC			
	ited Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
	of the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
4010 S. Ocean Drive	4010 S. Ocean Drive			
Suite 3509	Suite 3509			
Hollywood, FL 33019	Hollywood, FL 33019			
business entity with an active Florida registration.) The name and the Florida street addres Salas Law Firm P.A.	s of the registered agent are:			
Galas Law I IIII F.A.	Name			
	Name			
2601 East Oakland F	Park Blvd., Suite 406			
Florida street addr	Florida street address (P.O. Box NOT acceptable)			
Fort Lauderdale	FL 33306			
City				
liability company at the place desi registered agent and agree to act in th statutes relating to the proper and c	ent and to accept service of process for the above stated limited gnated in this certificate, I hereby accept the appointment as his capacity. I further agree to comply with the provisions of all omplete performance of my duties, and I am fumiliar with and ion 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:

Title:	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager MGR	Jeffrey S. Grant			
	4010 S. Ocean Drive, Suite 3509			
	Hollywood, FL 33019			
				
	-			
(Use attachment if necessary)				
ADTICLE W. Oshan and discussions of the				
ARTICLE V: Other provisions, if any. The general purpose for which the Company is our	ganized is to transact any lawful busienss for which a			
limited liability company may be organized under t	he laws of the State of Florida. The Company shall have			
all the powers granted to a limited liability company				
REQUIRED SIGNATURE:				
She bet t				
7/17				
Signature of a member or a	n authorized representative of a member			
This document is execured in accordance w	rith section 605.0203 (1) (b), Florida Statutes. I am aware that			
any false information submitted in a docume as provided for in s,817.155, F.S.	ent to the Department of State constitutes a third degree felony			
	A			
Typed or printed name of signee				
Typed or printed name of signee Filing Fees				
	4 MINE I WO			

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