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PICK-UP	WAIT	MAIL
(Bus	siness Entity Nan	ne)
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Certified Copies	Certificates	of Status
Special Instructions to F	filing Officer:	
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01/23/24--01011--013 **150.00



COVER LETTER

TO: New Filing Sec Division of Cor					
SUBJECT: Chodos & /	Associates, LLC				
SUBJECT:	(Name of Res	ultıng Florida Li	mited Cor	npany)	
The enclosed Articles (Business Entity" into a	of Conversion, Articl "Florida Limited Li	es of Organiz ability Compa	ation, an my" in a	d fees are submitted to coccordance with s. 605.10	onvert an "Other 45, F.S.
Please return all corres	pondence concerning	g this matter to) :		
Adam Chodos					
	(Contact Person)	<u></u>			
Chodos & Associates, Ll	_C				
	(Firm/Company)	_			
6145 NW 31st Court					
	(Address)				
Boca Raton, FL 33496					
(Ci	ty. State and Zip Code)				
mail@adamchodos.com					
E-mail Address: (to be	used for future annual re	port notification:	()		
For further information	n concerning this ma	iter, please ca	II:		
Adam Chodos		_at (<u></u>	,990-	3780	
(Name of Contact	(Person)	(Area Co	de) (Da	vtime Telephone Number)	
Enclosed is a check fo dollars and drawn on a	r the following amou bank located in the	nt: (All check United States	s proces	sed by this office must be	e payable in US
(\$25 for Conversion	S155.00 Filing Fees and Certificate of Status	□\$180.00 Fill and Certified	_	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address New Filing Second Division of Co P.O. Box 6327 Tallahassee, F.	etion rporations		New Divis The (2415	et Address: Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite	810 810

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Chodos & Associates, LLC
(Emer 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)
2-2-2010
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Chodos & Associates, 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 12th day of April	2024
Signature of Authorized Representativ	e of Limited Liability Company:
Signature of Authorized Representative: Printed Name: Adam Chodos	Title: Managing Member
	s Entity: [See below for required signature(s)]
Signature:Printed Name: Adam Chodos	Title: Managing Member
Signature:	Title:
	Title:
Signature:	
Signature:	Title:
Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, D If Directors or Officers have not been selec	
<mark>If Florida General Partnership or Limit</mark> Signature of one General Partner.	ed Liability Partnership:
<u>If Florida Limited Partnership or Limit</u> Signatures of <u>ALL</u> General Partners.	ed Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	io	
The name of the Limited Etablity Company	18.	
Chodos & Associates, LLC	101 C	
(Must contain the words "Limited Lia	bility Company, "L.L.C., or "LLC.)
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Lim	ited Liability Company is:
5 1 1 1 065 Add	Mailing Addmoss	
Principal Office Address:	Mailing Address:	
2255 Glades Rd., Suite 324 A	2255 Glades Rd., Suite	324 A
Boca Raton, FL 33431	Boca Raton, FL 33431	
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the same and the Florida street address.	egistered Agent. You must designate	Agent's Signature: an individual or another
Adam Chodos		
	ame	-
2255 Glades Rd., Suite 32		-
Florida street address (P.O. Box NOT acceptable)	
Boca Raton	FL 33431	
City	Zip	=
Having been named as registered agent ar liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and comple accept the obligations of my position as Registered Agent's	rd in this certificate, I hereby pacity. I further agree to co ete performance of my duties	accept the appointment as mply with the provisions of a condition of a condition with and condition with and
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The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member "MGR" = Manager		
MMBR	Adam Chodos	
	2255 Glades Rd., Suite 324 A	
	Boca Raton, FL 33431	

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47.		ç !
(Use attachment if necessary)		-
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LE V: Other provisions, if any.		
		
		1 "L C
REQUIRED SIGNATURE:		
		

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that 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.

Adam Chodos

Typed or printed name of signce

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)