# C1600002015

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DEVENDED

# Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 01/14/2025	<del></del>		
		⇔WAL.	K IN**
ENTITY NAME BB IN	SURANCE MARKETING, INC.		
DOCUMENT NUMBER		2025	e and
	**PLEASE FILE THE ATTACHED AND RE	>: *	
xxxxxxxx	Plain Copy	TURN**	Ö
	Certified Copy Certificate of Status		
	**PLEASE OBTAIN THE FOLLOWING FOR THE AL Certified Copy of Arts & Amendments Certificate of Good Standing		
	**APOSTILLE' / NOTARIAL CERTIFICA	ATTON**	
COUNTRY OF DESTIN	4 <i>TION</i>		
NUMBER OF CERTIFIC	PATES REQUESTED		
TOTAL OWED \$150.	00 ACCOUN	NT #: 120160000072	
		R FM	
Please call Tina at	the above number for any issues or concer	ens. Thank you so much!	

#### **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 pri BB INSURANCE MARKETING, I		
(Enter Name of Other Business En	utity)	
2. The "Other Business Entity" is a CORPORATION  (Enter entity type. Example: corporation, limited partner	ship, general partnership, common law or bungess trust, et	 te.)
First organized, formed or incorporated under the laws of(Enter	r state, or if a non-U.S. entity, the name of the country)	3 22
January 9, 1997 on	155	ગુ <del>-</del> ગ
(date of organization, formation or incorporation)	ASSEE, FL	-
3. The name of the Florida Limited Liability Company as se		1:
BB INSURANCE MARKETING, LLC		
(Enter Name of Florida Limited Liability C	Company)	
4. If not effective on the date of filing, enter the effective da		
(The effective date: Cannot be prior to date of receipt or the date this document is filed by the Florida Departmen Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	nt of State.)	
5. The plan of conversion has been approved in accordance v	with all applicable statutes.	
6. The "Converted or Other Business Entity" has agreed to pay	any members having appraisal rights the amount to	0

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 14th day of JANUARY	20_25		
Signature of Authorized Representative of Limi	ted Liability Company:		
Gason (	Brown		
Signature of Authorized Representative: Jason ( Printed Name: JASON BROWN	Title: Authorized Representative	_	
Signature(s) on behalf of Other Business Entity:			
Signature: Jason Brown Printed Name: JASON BROWN			
Printed Name: JASON BROWN	Title: PRESIDENT	- -	
Signature:		_	
Signature: Printed Name:	Title:	-	
Signature:		_	
Printed Name:	Title:	7025	=1
Signature:	ro: I	- 三	1 B
Printed Name:	I itle:	- 三	
Signature:	Title	- SCS	M
Printed Name:	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	- E. 9.1	
Signature:Printed Name:	Title	- (5) -	
Timed Name.		_	
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	ty Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:		
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:	
BB INSURANCE MARKET	
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10167 W. SUNRISE BLVD.	10167 W. SUNRISE BLVD.
3RD FLOOR	3rd FLOOR
PLANTATION, FL 33322	PLANTATION, FL 33322
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the insulation of the Ins	registered agent are:
10167 W. SUNRISE BLVD., 3	BRD FLOOR
Florida street address (P.C	). Box <u>NOT</u> acceptable)
PLANTATION	FL 33322
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV- The name and address of each person as Company:	thorized to manage and control the Limited Liabilit
Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	MEGA LEGACY HOLDINGS, INC.
MGR	14341 ARLINGTON PLACE
	DAVIE, FL 33325
	2025 J
	S S

(Use attachment if necessary)

**ARTICLE V:** Other provisions, if any.

The limited liability company is a manager-managed limited liability company.

# REQUIRED SIGNATURE: Jason Brown

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.

#### JASON 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) \$ 5.00 Certificate of Status (Optional)