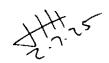
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(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,,
(Dogument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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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

Office Use Only



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SLUBHIARY OF STATE

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Gray & Associates R	isk Management, LLC		
(Name of Resulting Florida Limi	ted Company)	
		on, and fees are submitted to convey" in accordance with s. 605.1045, F	
Please return all correspondence	concerning this matter to:		
Terry D. Gray			
(Contact Po	erson)	-	
(Firm/Com	ipany)	-	
96075 Enclave Manor		-	
(Addre	ss)		
Fernandina Beach, Florida 32034		_	
(City, State and terrydgray@gmail.com	l Zip Code)		
E-mail Address: (to be used for fut	ure annual report notifications)	-	
	•		
For further information concerni	ng this matter, please call:		
Terry D. Gray	at ((952) 250-7998	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the follo- dollars and drawn on a bank loca	•	processed by this office must be pay	able in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)			ŞT .AT 25 Jan
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	THE POPSTATE STATE PROPERTY OF

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:

Gray & Associates Consulting, LLC

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a (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)
December 12, 2013
on December 12, 2013 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Gray & Associates Risk Management, 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	day of	20
Signature of Auth	orized Representative of Lim	ited Liability Company:
Signature of Author	orized Representative: Terr	y D. Gray
Printed Name: Terry	D. Gray	Title: Member
Signature(s) on he	half of Other Business Entity:	[See below for required signature(s)]
		· · · · · · · · · · · · · · · · · · ·
Printed Name: Tern	/ Déam'Graŷ?5 19.11 EST)	Title: Member
Printed Name: Fran	cesca Gray ²⁰²⁵ 13:32 EST)	Title: Member
Printed Name:		Title:
Printed Name:		Title:
		Title:
Signature:		
Printed Name:		Title:
If Florida Cornors	ation:	
Signature of Chairn	nan, Vice Chairman, Director, or	
If Directors or Office	cers have not been selected, an In	corporator must sign.
lf Florida General	Partnership or Limited Liabil	ity Partnership:
Signature of one Go	eneral Partner.	
If Florida Limited Signatures of <u>ALL</u>	Partnership or Limited Liabili General Partners.	ty Limited Partnership:
All others: Signature of an autl	horized person.	
Fees:	•	
Articles of	Conversion:	\$25.00
	orida Articles of Organization:	\$125.00
Certified C Certificate	• •	\$30.00 (Optional) \$5.00 (Optional)
Signature: Printed Name: Signature: Printed Name: If Florida Corpors Signature of Chairr If Directors or Office If Florida General Signature of one Go If Florida Limited Signatures of ALL All others: Signature of an auth Fees: Articles of Fees for Florida Signature	ation: nan. Vice Chairman, Director, or cers have not been selected, an Interest of Limited Liability eneral Partner. Partnership or Limited Liability General Partners. Conversion: orida Articles of Organization:	Title:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:
Gray & Associates Risk Management, LLC (Must contain the words "Limited Liabi	lity Community "L. L.C. " or "L.L.C. ")
(wast contain the words. Ennited Elabi	my company. E.E.C., or Life.
ARTICLE II - Address:	
The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
96075 Enclave Manor	96075 Enclave Manor
Fernandina Beach, Florida 32034	Fernandina Beach, Florida 32034
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You must designate an individual or another
Terry D Gray	
Nar	me
96075 Enclave Manor	
Florida street address (P.	O. Box NOT acceptable)
Fernandina Beach	FL ³²⁰³⁴
City	Zip
Having haan named as registered agent and	to accept service of process for the above stated limits

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.

<u>Terry D. Gray</u> Terry D. Gray (Jan 8, 2025 19.11 EST)

Registered Agent's Signature (REQUIRED)

(CONTINUED)

AR	TIC	ÇL	E	IV-
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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	Terry Dean Gray 96075 Enclave Mnr Fernandina Beach, Florida 32034	
AMBR	Francesca Gray 96075 Enclave Manor	\$.**
	Fernandina Beach, Florida 32034	FILED RE FARY OF
· · · · · · · · · · · · · · · · · · ·	 ල	STATE
(Use attachment if necessary)		
ARTICLE V: Other provisions, if any.		-
REQUIRED SIGNATURE:	Terry D. Gray rry D. Gray (Jan 8 2025 19 11 EST	-

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.

Terry D. Gray, Member

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)