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

Office Use Only



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W22-14246H



COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Traveling Thomas, LLC		
(Name of R	esulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Art Business Entity" into a "Florida Limited	-	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerni	ng this matter to:	
Lauren Jamerson		
(Contact Person)	· · · · · ·	
Slingshot, LLC		
(Firm/Company)		
320 Gold Ave. SW, Ste. 620		
(Address)		
Albuquerque, New Mexico 87102		
(City, State and Zip Code)	
FILINGS@L4SB.COM		
E-mail Address: (to be used for future annual	report notifications)	
For further information concerning this n	natter, please call:	
Lauren Jamerson	at (715-5700
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the		rocessed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cop	
Mailing Address: New Filing Section		Street Address: New Filing Section
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810

INHS11 (7/17)

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.

1. The name of the "Other Business Entity" immediately prior to the fi Thomas Travels, LLC	ling of the Articles of Conversion is:
(Enter 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.)
First organized, formed or incorporated under the laws of (Enter state, or if a	non-U.S. entity, the name of the country)
April 24, 2021	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the	he attached Articles of Organization:
Traveling Thomas, 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 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 redocument's effective date on the Department of State's records.	nor more than 90 calendar days after)
5. The plan of conversion has been approved in accordance with all approved in accordance with a secondary with a seconda	olicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any memb which such members are entitled under ss. 605.1006 and 605.1061-605	
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=		
		

Signed this 22	day of October	20_22	.
Signature of Auth	orized Representativ	ve of Limited Lia	bility Company:
Signature of Autho	rized Representative: las Joseph Ferrer	Thomas	Jerrer Member
rinted Name: 11100	ias Joseph Feller	rue:	Mellibei
			ow for required signature(s)]
Signature: / rol	nas Ferr	er	<u>.</u>
Printed Name: Thom	nas Joseph Ferrer	Title:	Member
Signature:			
Printed Name:		Title:	
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
If Florida Corpora	tion:		
	an, Vice Chairman, D	irector, or Officer.	
If Directors or Offic	ers have not been sele	cted, an Incorporat	or must sign.
If Florida General	Partnership or Limit	ed Liability Partr	ership:
Signature of one Ge			
If Florida Limited	Partnership or Limit	ed Liability Limit	ed Partnership:

Signatures of ALL General Partners.

All others:
Signature of an authorized person.

<u>Fees:</u>

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 LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lia	ibility Company i	s:				
Traveling Thomas, LLC	a words "Limited Liahi	Hity Company, "L.L.C.,"	or "H.C.")			
	c words Emilied Elabi	any company. E.E.C.,	or use.)			
ARTICLE II - Address: The mailing address and stre	eet address of the	principal office of	the Limited Liab	ility Com	ipany i	s:
Principal Office Address:		Mailing Addr	ess:			
2831 Forbes St		2831 Forbes St				
Jacksonville, FL 32205-7520		Jacksonville, FL	32205-7520			
ARTICLE III - Registered (The Limited Liability Company cannot business entity with an active Florid The name and the Florida st	not serve as its own Reg a registration.) reet address of the Joseph Ferrer	gistered Agent. You must e registered agent a	designate an individuo	Signature al or another ALL AHASSI	2023 JAN 23	
	Nar	me		m.	?	[
2831 For			 -	77 08 h	91:11HV	_
Florida	street address (P.	.O. Box <u>NOT</u> acce _l	ptable)	22 : 33 :	2	
Jackson	ville	_{FL} 32205-75	20	•	_	
- -	City	Ziŗ)			

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..

Thomas Ferrer

Registered Agent's Signature (REQUIRED)

(CONTINUED)

A	RT	CI	F	\mathbf{W}_{-}

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

"MGR" = Manager	
AMBR	Thomas Joseph Ferrer
	2831 Forbes Street
	Jacksonville, FL 32205-7520 United States
	A
	<u>ーー シー</u> (
(Use attachment if necessary)	<u> </u>
CLE V : Other provisions, if any.	2). 2).

REQUIRED SIGNATURE:

Thomas Ferrer

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.

Thomas Joseph Ferrer

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)