102000029950

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
11/7 CONV. UC

Office Use Only



200008767612

HLM

11/08/02--01103--003 **180.00

NOTIVE STATES OF NOTIVED TO STATE OF STATES OF

02 NOV -7 PM 3: 18

Capitol Services, Inc.	· ·
1406 Hays St., Suite 2	` -
Tallahassee, FL 32301 (850) 878-47 Kathi or Bren	. mar
	Office Use Only
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S) (if known):
1. Edison Florida Pr. (Corporation Name)	operties, LLC (Document #)
2. (Corporation Name)	(Document #)
3(Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time	11/7 Certified Copy of both
☐ Mail Out ☐ Will wait	☐ Photocopy ☐ Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other Other	AMENDMENTS ☐ Amendment ☐ Resignation of R.A., Officer/Director ☐ Change of Registered Agent ☐ Dissolution/Withdrawal ☐ Merger
OTHER FILINGS ☐ Annual Report ☐ Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

Examiner's Initials



Resulment

FLORIDA DEPARTMENT OF STATE

Jim Smith Secretary of State

November 7, 2002

CAPITOL SERVICES

SUBJECT: EDISON FLORIDA PROPERTIES, LLC

Ref. Number: W02000032028

We have received your document for EDISON FLORIDA PROPERTIES, LLC and check(s) totaling \$210.00. However, your check(s) and document are being returned for the following:

The Conversion and Articles of Organization are filed as one document, therefore, the fee for a Certified Copy is \$30.00. You have overpaied by \$30.00, pleas send a new check in the amount of \$180.00.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 802A00060980

Michelle Hodges Document Specialist RECEIVED

CERTIFICATE OF CONVERSION

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the attached articles of organization and this certificate of conversion to convert to a Florida limited liability company:

FIRST: The name of the unincorporated business immediately prior to filing this document was
EDISON FLORIDA PROPERTIES ASSOCIATES
SECOND: The date on which and the jurisdiction in which the unincorporated business was first created or otherwise came into being are: A. Date: B. Jurisdiction: New Jersey C. If different from the above noted jurisdiction, the jurisdiction immediately prior to its conversion:
THIRD: The name of the limited liability company as set forth in the <u>attached</u> articles of organization is:
EDISON FLORIDA PROPERTIES, LLC
Signatury of a Member or an Authorized Representative of a Member (in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) GARY DORIN
Typed or Printed Name of Signee

FILING FEES:

\$100.00 Filing Fee for Articles of Organization S 25.00 Filing Fee for Registered Agent Designation S 25.00 Filing Fee for Certificate of Conversion

5 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.)

INHS11(10/99)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: EDISON FLORIDA PROPERTIES, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

100 Washington Street Newark, New Jersey 07102

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Name Paralegal & Aftorney Service Bureau,	Inc.
1406 Hays St., Suite 2	
Florida street address (P.O. Box NOT acceptable)	
Tallahassee -FL 32301	
City, State, and Zip	

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 608, F.S.

Registered Agent's Signature Kathleen J. Hill, Pres.

(An additional article must be added if an effective date is requested)

Signature of member of an authorized representative of a member.

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Gary Dorin
Typed or printed name of signee

Filing Free:

\$100.00 Filing Fee for Articles of Organization

5 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SEUNETALES SIATE