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(Business Entity Name)

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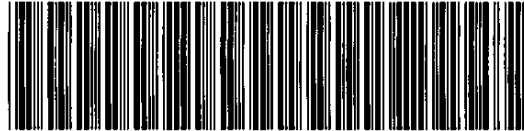
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

H 2006 N LLC

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- \_\_\_ Art of Inc. File
- \_\_\_ LTD Partnership File
- \_\_\_ Foreign Corp. File
- ✓ L.C. File Conversion
- \_\_\_ Fictitious Name File
- \_\_\_ Trade/Service Mark
- \_\_\_ Merger File
- \_\_\_ Art. of Amend. File
- \_\_\_ RA Resignation
- \_\_\_ Dissolution / Withdrawal
- \_\_\_ Annual Report / Reinstatement
- \_\_\_ Cert. Copy
- \_\_\_ Photo Copy
- \_\_\_ Certificate of Good Standing
- \_\_\_ Certificate of Status
- \_\_\_ Certificate of Fictitious Name
- \_\_\_ Corp Record Search
- \_\_\_ Officer Search
- \_\_\_ Fictitious Search
- \_\_\_ Fictitious Owner Search
- \_\_\_ Vehicle Search
- \_\_\_ Driving Record
- \_\_\_ UCC 1 or 3 File
- \_\_\_ UCC 11 Search
- \_\_\_ UCC 11 Retrieval
- \_\_\_ Courier

Signature

Requested by: SW

6/16

Name

Date

Time

Walk-In

Will Pick Up

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Limited Liability Company**

This Certificate 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.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Certificate of Conversion is:

**62<sup>nd</sup> AVENUE ANIMAL HOSPITAL and KENNEL**

2. The "Other Business Entity" is a **general partnership**, first organized, formed or incorporated under the laws of **Florida** on **December 5, 1995**.

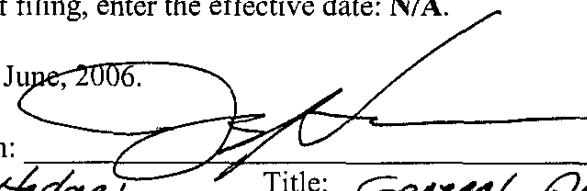
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated: **N/A**

4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

**H 2006 N, LLC**

5. If not effective on the date of filing, enter the effective date: **N/A**.

Signed this 15<sup>th</sup> day of June, 2006.

Signature of Authorized Person: 

Printed Name: John E. Hodge

Title: General Partner

**Fees:**

Certificate of Conversion: \$25.00

Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional)

Certificate of Status: \$5.00 (Optional)

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION OF H 2006 N, LLC,  
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, hereby adopts the following Articles of Organization:

**ARTICLE I - Name:**

The name of the Limited Liability Company is **H 2006 N, LLC.**

**ARTICLE II - Address:**

The mailing address of the Limited Liability Company is:

2050 – 62<sup>nd</sup> Avenue N  
St. Petersburg, Florida 33702

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

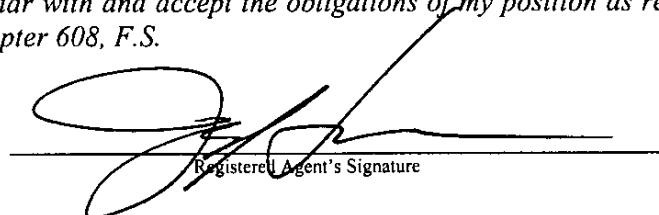
2050 – 62<sup>nd</sup> Avenue N  
St. Petersburg, Florida 33702

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

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

John E. Hodges  
2050 – 62<sup>nd</sup> Avenue N  
St. Petersburg, Florida 33702

*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

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TALLAHASSEE, FLORIDA

**ARTICLE IV - Management** (Check box if applicable):

☐ The Limited Liability Company is to be managed by one manager and is, therefore, a manager - managed company. The name and address of the manager are:

John E. Hodges  
2050 - 62<sup>nd</sup> Avenue N  
St. Petersburg, Florida 33702

**ARTICLE V — Limitation on Agency Authority of Members:**

Pursuant to Section 608.4235 of the Florida Limited Liability Company Act, no member of the Limited Liability Company shall be an agent of the Company solely by virtue of being a member, and no member shall have authority to incur debt or contractual liability on behalf of the Company solely by virtue of being a member.

**ARTICLE VI — Indemnification:**

Pursuant to 608.4229, the Limited Liability Company shall have the power to indemnify any member or manager, or any former member or manager, to the full extent permitted by law from and against any and all claims whatsoever.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 15 day of June, 2006.

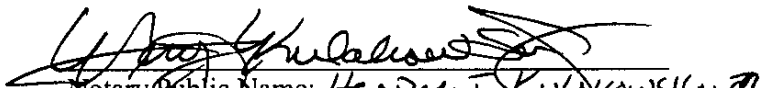
  
\_\_\_\_\_  
John E. Hodges

(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.)

STATE OF FLORIDA                     )  
  ) ss:  
COUNTY OF PINELLAS             )

The foregoing instrument was acknowledged before me this 15<sup>th</sup> day of June, 2006, by John E. Hodges.



  
Notary Public Name: Henry J. Kulakowski, Jr.  
State of Florida at Large  
My commission expires: \_\_\_\_\_  
Personally known: ☒ OR Produced I.D.: \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_