43000149264

(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:

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

RECEIVED

13 OCT 22 PH 4: 26

SECTE AND OF STATES

B. BOSTICK

OCT 23 2013

EXAMINER



ACCOUNT NO. : 12000000195

REFERENCE: 855128 4312639

AUTHORIZATION :

COST LIMIT :

ORDER DATE: October 22, 2013

ORDER TIME : 2:46 PM

ORDER NO. : 855128-020

CUSTOMER NO: 4312639

DOMESTIC FILING

NAME: PMSI, LLC

EFFECTIVE DATE:

XX ___ CERTIFICATE OF CONVERSION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS:

COVER LETTER

	on Section of Corporations				
SUBJECT:	PMSI, LLC				
	(Name	of Resulting Florida Lim	ited Company)		
		_	tion, and fees are submitted to company" in accordance with s. 60		
Please return all c	correspondence concern	ning this matter to:			
	John Bencivenga				
	(Contact Person)				
	PMSI, LLC				
	(Firm/Company)				
	175 Kelsey Lane		•		
	(Address)				
	Tampa, Florida, 3361	9			
	(City, State and Zip Cod	·			
iol	hn_bencivenga@pmsionline	e.com			
	used for future annual rep				
For further inform	nation concerning this	matter, please call:			
John Bencivenga		at (813)	626 - 7788	7, ≥	
(Name of Co	ontact Person)		nd Daytime Telephone Number)		
Enclosed is a chec	k for the following am	ount:		2013 OCT 22 SECRETARY ALLAHASSE	<u></u>
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	s 155.00 Filing Fees and Certificate of Status	15180.00 Filing Fees and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status	22 PH 4: 38 RY OF STATE SEE-FLORID,	LED
STREET ADDR	ESS:	MAILIN	IG ADDRESS:		
_	Registration Section		Registration Section		
Division of Corporations		Division of Corporations P. O. Box 6327			
Clifton Building 2661 Executive Center Circle			6 6327 see, FL 32314		
2001 Excounts C	Char Choic	1 @11@11@22	~~; * T		

Tallahassee, FL 32301

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 this Certificate Conversion is:	
PMSI, Inc. (Enter Name of Other Business Entity)	40*(*
`	
2. The "Other Business Entity" is a Corporation	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
first organized, formed or incorporated under the laws of Florida	
(Enter state, or if a non-U.S. entity, the name of the country)	
on 12/01/2003	
(Enter date "Other Business Entity" was first organized, formed or incorporate	d)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the which it is now organized, formed or incorporated:	I30C ECRE
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	E P
PMSI, LLC	- ESS : C
(Enter Name of Florida Limited Liability Company)	4: 38 STATE ORIDA
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this docume filed by the Florida Department of State; AND 2) must be the same as the effective date is attached Articles of Organization, if an effective date is listed therein.)	
6. The conversion is permitted by the applicable law(s) governing the other business entity and conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the	
 The "Other Business Entity" currently exists on the official records of the jurisdiction under currently organized, formed or incorporated. 	which it is

Signed this 22nd day of Occiber	2013	
Signature of Member or Authorized Rec Individual signing affirms that the facts st constitutes a third degree felony as provid-	sted in this document are true. Any false	<u>ny:</u> isformation
Signature of Member or Authorized Repres	entative: Julia / Mail Time: Anthorized Representative	<u> </u>
Signature(s) on behalf of Other Business I this document are true. Any false informates \$17.155, F.S. [See below for required sign	tion constitutes a third degree (elony as prainte(s).)	The facts stated in roylded for in
Signature: Julia A. Jenese Printed Name: Julia A. Jenese	Title: Secretary	
Printed Names Julia A. Jenses	I (the: Secretary	
Signature:	dest.	
Printed Name:		
Signature;		
Printed Name:	Title:	
Signature:		
Signature: Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Dire	etor, or Officer.	
If Directors or Officers have not been selecte		S ~ -
If Florida General Partnership or Limited	Tickilife Beathmachine	SEXX S
Signature of one General Partner.	Campilled Last marks mily.	
If Florida Limited Pattnership or Limited Signatures of ALL General Partners.	Liability Limited Parisership:	D STATE LORIDA
		500
All others: Signature of an authorized person.		
Fees:		
Tree:		
Certificate of Conversion:	\$2,5.00	
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	
- 1	Page 2 of 2	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
PMSI, LLC	. '	
(Must end with the words "Limited Liability Company, the abbrev	reviation "L.L.C.," or the designation "LLC.")	
A TOPOTRONE DE VIC. A 11		
ARTICLE II - Address: The mailing address and street address of the princ	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
PMSI, LLC	PMSI, LLC	
175 Kelsey Lane	175 Kelsey Lane	
Tampa, Florida, 33619	Tampa, Florida, 33619	
1201 H	CRETARY A Service Company Name Hays Street (P.O. Box NOT acceptable)	2013 OCT 22 PM 4: 38
Tallahassee,	FL 32301	
City, St	State, and Zip	
company at the place designated in this certificate, l agree to act in this capacity. I further agree to comp proper and complete performance of my duties, and position as registered agent as provided for in Chap Registered Age	Sue G. Knight Assistant Vice President gent's Signature (REQUIRED)	
(CI	CONTINUED)	

Page 1 of 2

FL099 - 10/05/2010 CT System Online

The mane and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM PMSI Holdings, LLC 2711 Centerville Rd, Ste 400 Wilmington, Delaware, 19808 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Conversion, if an effective date listed therein.) REQUIRED SIGNATURE: Signature of a member of a mathorized 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. I am aware that any false information submitted in a document to the Department of State constitutes a faird degree felony as provided for in 4.817.155, F.S.) Julia A. Jensen Typed or printed name of signee

Page 2 of 2

ARTICLE IV- Manager(s) or Managing Member(s):