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(Address)

(City/State/Zip/Phone #)

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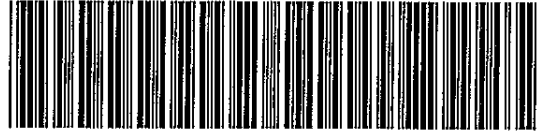
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
03 DEC -3 AM 10:38

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WILLIAM BOJO CARPET SERVICE, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William D Bojo
(Name of Person)

William Bojo Carpet Service, LLC
(Firm/Company)

424 Ave. D, S.E.
(Address)

Winter Haven, Fl. 33880
(City/State and Zip Code)

For further information concerning this matter, please call:

Deborah J. Bojo at (863) 299-2991
(Name of Person) (Area Code & Daytime Telephone Number)

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SECRETARY OF CORPORATIONS
03 DEC -3 AM 10:39
DIVISION OF CORPORATIONS

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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:

WILLIAM BOJO CARPET SERVICE, ~~LLC~~

SECOND: The date on which and the jurisdiction in which the unincorporated business was first created or otherwise came into being are:

- A. Date: 1974
- B. Jurisdiction: Polk County, Florida
- 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 attached articles of organization is:

WILLIAM BOJO CARPET SERVICE, LLC

William D. Bojo
Signature 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.)

William D. Bojo

Typed or Printed Name of Signee

FILING FEES:

- X \$100.00 Filing Fee for Articles of Organization
- X \$ 25.00 Filing Fee for Registered Agent Designation
- X \$ 25.00 Filing Fee for Certificate of Conversion
- ~~X \$ 30.00 Certified Copy (optional)~~
- X \$ 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.)

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DEC - 3 AM 10:39

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

WILLIAM BOJO CARPET SERVICE, LLC

ARTICLE II - Address:

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

Principal Office Address:

William D. Bojo

Deborah J. Bojo

Mailing Address:

424 Ave. D, S.E. Winter Haven, Fl. 338.

424 Ave. D, S.E. Winter Haven, Fl. 338.

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

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

William D. Bojo

Name

424 Ave. D. S.E.

Florida street address (P.O. Box **NOT** acceptable)

Winter Haven FLORIDA 33880

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, Florida Statutes..

William D Bojo

Registered Agent's Signature

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03 DEC 2009
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The name and address of each Manager or Managing Member is as follows:

Name and Address:

"MGRM" = Managing Member

Winter Haven, Fl. 33880

Winter Haven, Fl. 33880

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DIVISION OF CORPORATIONS
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REQUIRED SIGNATURE:

Typed or printed name of signee

\$ 5.00 Certificate of Status (Optional)