L04000005970

(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



600026905966

01/16/04--01007--008 **185.00



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: A, L. Evans 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:
Arthur Lamar Evans (Name of Person)
A.L. Evans (Firm/Company)
4530 S. FL. Ave
Invenues FL 34450 (City/State and Zip Code)
For further information concerning this matter, please call:
Arthur Evans =1352, 437-5825

(Area Code & Daytime Telephone Number) (Name of Person)

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 <u>attached articles of organization</u> and this certificate of conversion to conveto a Florida limited liability company:

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: \(\frac{100}{200} \)

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:

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.)

Typed or Printed Name of Signee

FILING FEES:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORC FOR FLORIDA LIMITED LIAN ARTICLE I - Name: The name of the Limited Liability Company is:	The same of the sa
A.L. Evar	15 LLC Plans
ARTICLE II - Address: The mailing address and street address of the princi	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Arthur Lamar Evans	Arthur Lamar Evans
4530 S FLAVE	4530 S. FL. AVQ
TOVOCO 055 FL 34450	Jan 20035 FL 34450

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> Arthur Leman Evans +530 5, Fl. Ave Florida street address (P.O. Box NOT acceptable)

TOVECULSS FLORIDA 34450

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...

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGRM" = Managing Member				
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	May a		
MGRM	Arthur Lamar Evan 4530 S. FL. Ave Foverness R. 34450	Solly S		
MGRH	Glenda Faye Evans 4530 S. FL: Ave Toverness FL 34450			
(Use attachment if necessary)				
NOTE: An additional article must REQUIRED SIGNATURE:	be added if an effective date is requested.			
-	2ma Land n suthorized representative of a member.			
	508.408(3), Florida Statutes, the execution			

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

that the facts stated herein are true.)

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee