10400064544

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL
	siness Entity Nam	Yer Yer
(Du	oness Linky Hall	,
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,	J	
		J
<u> </u>		

Office Use Only



800040160878

08/23/04--01045--019 **185.00

N08/31/04

DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ST LUCIE GLASS + MIRROR 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:	
FOSTER N BLACKBURN (Name of Person)	_
STLUCIE GLASS & MIRROR, LIC (Firm/Company)	
2527 OKEKCHOBIE BU.	O VICE
F. P. P. S. 34982 (City/State and Zip Code)	AUG 23 PM
For further information concerning this matter, please call:	PM 12: 55
FOSTER BLACKBURD 31 772, 468-4644	

STREET ADDRESS:

(Name of Person)

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

(Area Code & Daytime Telephone Number)

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 convert to a Florida limited liability company:

FIRST: The name of the unincorporated business immediately prior to filing this document was:	
ST LUCIE GLASS & MIREOR	
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: STLUCIC Co. 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:	
SY. LUCIE GLASS & MIRROR, LLC. 2 =	
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.) FOSTER W. BLACKBURD. Typed or Printed Name of Signee	FILED STATE

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

ARTICLE I - Name:

The name of the Limited Liability Company is	s:
ST. LUCIE GLASS + M	LEROR, L.L.C.
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2527 OKKECHOBEE Bd.	_2527 DKEECHOREZ Rd.
F1. PSERCE: FC. 34947	F. P. P. 1800, FL. 34947
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the FOSICE No.	
2522 OKE	CHORE PU. O. Box NOT acceptable)
	FL FLORIDA 34947 , and Zip
heen named as registered agent and to accept so	rvice of process for the above stated limited liability

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..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Mana The name and address of each Manage	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
mer_	FOSTER W BLACEBURN 2527 OVEE MOBILE Ed. F1. RILLER; F. 34947
•. · · · · · · · · · · · · · · · · · · ·	
	Ne 23
(Use attachment if necessary)	PH 12: 55
NOTE: An additional article must l	be added if an effective date is requested.
REQUIRED SIGNATURE:	7 Bel

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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

Wett BLACEAUEN Typed or printed name of signee

that the facts stated herein are true.)