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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations							
	SUBJECT: NEW CENTURY AIR 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:							
DAVID E. SCHULSTEAD (Name of Person)							
NEW CENTURY AIR LLC (Firm/Company)							
5086 SE 102 PLACE # E19 (Address)							
BELLEVIEW, FL 34420 (City/State and Zip Code)							
For further information concerning this matter, please call:							
	DAVID E. SCHULSTEAD at (352) 239-0127 (Name of Person) (Area Code & Daytime Telephone Number)						
	Enclosed is a check for the following amount:						
	□ \$125.00 Filing Fee Certificate of Status □ \$130.00 Filing Fee Certified Copy (additional copy is enclosed) □ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)						

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 convert to a Florida limited liability company:

FIRST: The name of the unincorporated business immediately prior to filing this document was	s:
NEW CENTURY AIR LTD.	٠
SECOND: The date on which and the jurisdiction in which the unincorporated business was fir created or otherwise came into being are: A. Date: OCTOBER 29,2002 B. Jurisdiction: MARION COUNTY, FLORIDA C. If different from the above noted jurisdiction, the jurisdiction immediately prior its conversion:	
THIRD: The name of the limited liability company as set forth in the <u>attached</u> articles of organization is: NEW CENTURY AIR LLC	_•
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.)	0
DAVID E. SCHULSTEAD Typed or Printed Name of Signee	04 NOV 17 PM
FILING FEES: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Filing Fee for Registered Agent Designation \$ 25.00 Filing Fee for Cortificate of Convergion	PH 14: 25

(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.)

\$ 30.00 Certified Copy (optional)\$ 5.00 Certificate of Status (optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:			
NEW CENTURY AIR LLC			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is	; :		

ARTICLE I - Name:

Principal Office Address:	Mailing Address:			
12485 SE GIST COURT BELLE VIEW, FLORIDA 34420	P.O. BOX 2294 BELLEVIEW, FLORID 34421-2294	4		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:				
DAVID E. SCH	· · · · · · · · · · · · · · · · · · ·	NOV 1		
_	PLACE # E 19 Iddress (P.O. Box NOT acceptable)	VOISOUE JIVE S CZ : H IL		

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

City, State, and Zip

(CONTINUED)

Page 1 of 2

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	Name and Address:				
MC-R	CREG ADAMS 12485 SE GIST COURT BELLEVIEW, FL 34420				
MGR	DAVID SCHULSTEAD 5086 SE 102MB PL HE 19 BELLEVIEW, FL 34420				
(Use attachment if necessary)					
NOTE: An additional article must be	added if an effective date is requested.				
REQUIRED SIGNATURE:					
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.)					
DAVID E. SCHULSTEAD Typed or printed name of signee					

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Attachment to Articles Of Organization

ARTICLE V- Requested Effective Date: January 1, 2005

Signature of Authorized Representative:

Signature of a member or authorized representative of a member

DAVID E. SCHULSTEAD

Typed or printed name of signee