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(Requestor's Name)
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PICK-UP WAIT MAIL
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TRANSMIT	TAL LETTER	· 05
TO: Registration Section Division of Corporations		JUX ~6
SUBJECT: CARROLL GROUP	LLC	79
(Name of Limited	Liability Company)	PH 3: 58
The enclosed Articles of Organization and fee(s) are su	ibmitted for filing.	-
Please return all correspondence concerning this matter	r to the following:	
CLIFFORD CARR	OLL	
(N	lame of Person)	
CARROLL GROUP L	_LC	
(F	Firm/Company)	
2520 SILVER PALI		
NORTH PORT FLO	ORIDA 34289	8
(City/S	State and Zip Code)	_
For further information concerning this matter, please of	eall:	
JEFFREY BERMAN	at ( <u>410</u> <u>308-0</u> (Area Code & Daytime Te	<b>3</b> ₀0
(Name of Person)	(Area Code & Daytime To	lephone Number)
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\Bigcirc \text{\$130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING A	
Registration Section Division of Corporations	Registration Section Division of Corporations	
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, F	

## 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:		
CARROLL GROUP, 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:  B. Jurisdiction:  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:		
CARROLL GROUP 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.)  CLIFF CARROLL  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.)

PM 3:58

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	ny is:	
CARROLL GROUP,	LLC	
ARTICLE II - Address:		
, —	the principal office of the Limited Liability Company is:	
The maning address and street address of	the principal office of the Ballicoa Ballotty Company to	
Principal Office Address:	Mailing Address:	
2520 STIVER PALM RD	2520 SILVER PALM RD 1888 NORTH FORT FLORIDA 34288	
NORTH FORT TURE DA ST	408 TURIN TURI TERRETA 54288	
ARTICLE III - Registered Agent, Regis	stered Office, & Registered Agent's Signature:	
The name and the Florida street address of	f the registered agent are:	
CLIFF CAR	ROLL	
	PROLL Name	
2520 SILVE		
Florida str	ect address (P.O. Box NOT acceptable)	
NORTH POR	T PL 34288	
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, F.S..

Registered Agent's Signature

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	CLIFF CARROLL  2500 SILVER PALM RD  NORTY PORT FL 34288
(Use attachment if necessary)	
NOTE: An additional article must b	e 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.)

CLIFF CARROLL

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)