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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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SECRETARY OF STATE

THE CIMIN

COVER LETTER

TO: Registration Section Division of Corporations		
·		
SUBJECT: JAMES O'DAY COMPANY (Name of Resulting F	Y, LLC Florida Limited Company)	
, -	ticles of Organization, and fees are submitted to	
Please return all correspondence concerning	g this matter to:	
Joseph E. Miniclier (Contact Person) Stromire, Bistline & Minicl	lier 5	06 JUN 12 PH 4: 32
(Firm/Company) 1970 Michigan Avenue - Build (Address) Cocoa, FL 32922	lding E	OF STATE
(City, State and Zip Code)		
For further information concerning this matter JOSEPH E. MINICLIER (Name of Contact Person)	at (321) 639-0505 (Area Code and Daytime Telephone Number)	
Enclosed is a check for the following amoun	nt•	•
\$150.00 Filing Fees \$155.00 Filing Fees \$	\$180.00 Filing Fees and Certified Copy Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:	30
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a <u>Florida corporation</u> . (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)	06 JUN 12 PM 4: 52
first organized, formed or incorporated under the laws of <u>Florida</u> (Enter state, or if a non-U.S. entity, the name of the country)	É P
on May 4, 2005 (Enter date "Other Business Entity" was first organized, formed or incorporated)	of STATE OF STATE
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:	
N/A	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
JAMES O'DAY COMPANY, LLC	

Page 1 of 2

(Enter Name of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the effective date: <u>upon filing</u>. (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

Signed this 9th day of June 2006.

Signature of Authorized Person:

Printed Name: Joseph E. Miniclier Title:

President

Fees:

Certificate of Conversion: \$25.00

Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (

Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
JAMES O'DAY COMPAN	Y, LLC		
(Must end with the words "Limited Liability Compar	ny, "Limited Company" or their abbreviat	ion "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Lin	nited Liability Company is:	
Principal Office Address:	Mailing Address:		
1970 Michigan Avenue	Same	7.S	
Building E			

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature of the Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another.

business entity with an active Florida registration.)

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

32922

Name

1970 Michigan Avenue - Building E

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

Cocoa FL 32922

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.

egistered Agent's Signature (REQUIRED)

(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:

Name and Address:
JOSEPH E. MINICLIER 1970 Michigan Avenue - Building E
Cocoa, FL 32922 RALPH McCOIG 315 Brevard Avenue - Suite 576 Cocoa, FL 32922
RALPH McCOIG 315 Brevard Avenue - Suite 5 P.C. Cocoa, FL 32922
he date of filing: (OPTIONAL) be specific and cannot be more than five business days prior

Signature of a member or an authorized representative of a member.

(In eccordance 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.)

JOSEPH E. MINICLIER

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)