D60000716203

(Requestor's Name)		
(Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Sanaial landwardings to Filing Office (1997)		
Special Instructions to Filing Officer 9131		
Corp- LC Conversion		
Mily a margine		

Office Use Only



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07/28/06--01018--009 **150.00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: C. BROWN INSTALLATION - LIC
(Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
CHRIS BROWN (Contact Person)
C BROWN INSTALLATION INC.
(Firm/Company) 2905 S. PARK AUE (Address)
SANFORD FL 32773
(City, State and Zip Code)
For further information concerning this matter, please call:
CHRIS OR SHER! at (321) 377 8475
(Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & \$155.00 Filing Fees and Certificate of Status \$180.00 Filing Fees & \$185.00 Filing Fees, Certified Copy, and Certificate of Status Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations 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:
C. BROWN INSTALLATION INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>CORPORATION</u> PDH-81860
(Enter entity type. Example: corporation, limited partnership, sole proprietorship,
general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws ofFLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)
on 5-24-04
(Enter date "Other Business Entity" was first organized, formed or incorporated)
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:
C. BROWN INSTALLATION, LLC.
(Enter Name of Florida Limited Liability Company)

Page 1 of 2

5. If not effective on the date of filing, enter the effective date: OATE OF FIUNG
(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; AND 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 25 day of July 2006.

Signature of Authorized Person: Title: Prosider

Fees:

Certificate of Conversion: \$25.00

Fees for Florida Articles of Organization: \$25.00

\$125.00

Page 2 of 2

\$30.00 (Optional) \$5.00 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

C. BROWN INSTAULATION, LC.

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or

Mailing Address:

The mailing address and street address of the principal office of the Limited

ARTICLE I - Name:

ARTICLE II - Address:

Principal Office Address:

business entity with an active Florida registration.)

Liability Company is:

"L.C.,")

Signature:

individual or another

The name of the Limited Liability Company is:

CHRIS BROWN
2905 S. PARK AUE
Florida street address (P.O. Box NOT acceptable)
SANFORD FL, 32773
City, State, and Zip

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 $\land \land$ Chapter 608, F.S..

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an

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	Name and Address:	
"MGRM" = Managing Member		
MGR.	SHERI BROWN	
	29.05 S.PARL A.E.	
	3AUMIU) H 327B	
	9.00 Mark 10.00 Mark 1	
	the state of the s	
	(Use attachment if necessary)	
RTICLE V: Effective date, if other than the	adote of filing: FILING DATE	
OPTIONAL)	date of fining.	
	be specific and cannot be more than five	
usiness days prior to or 90 days after the d	ate of filing.)	
REQUIRED SIGNATURE:		
Shev A. B	MO10	
Signature of a member or an au	thorized representative of a member.	
(In accordance with section 608.	408(3), Florida Statutes, the execution firmation under the penalties of perjury	
that the facts st	ated herein are true.)	
SHOZI A.BR	POWN	
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)