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(Requestor's Name)		
(Address)		
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
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SECRETARY OF STATE PALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: BRANELL		
(Name of Resulting	g Florida Limited Company)	
The enclosed Certificate of Conversion, Auconvert an "Other Business Entity" into a "accordance with s. 608.439, F.S.		
Please return all correspondence concernin	g this matter to:	
Kim Schmittendorf	•	
(Contact Person) (Firm/Company)		TA _{CO}
(Firm/Company)	———— با	2006 OCT 12 SECRETARY
25345 W. Newberry Ro (Address) Newberry FL 326A (City, State and Zip Code)		OCT 12 P RETARY OF ST AHASSEE, FLO
(City, State and Zip Code)	tankan di dankan da	P 1: 30 P STATE FLORIDA
For further information concerning this ma	itter, please call:	Q. 4
Kin Schnithendorf (Name of Contact Person)	$at(352) \partial \partial z$	2 - 0085
		me Telephone Number)
Enclosed is a check for the following amou	ant.	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of Status	and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING AD Registration Sec Division of Cor P. O. Box 6327 Tallahassee, FL	ction porations
Tallahassee El 20201	,	

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> 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: BRANEIII			
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a SOF proprietorship (Enter entity type. Example: corporation, limited partnership, sole proprietorship,			
first organized, formed or incorporated under the laws of floridar (Enter state, or if a non-U.S. entity, the name of the country)			
on 6 005 (Enter date "Other Business Entity" was first organized, formed or incommated)			
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:			
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:			
Branelli			
(Enter Name of Florida Limited Liability Company)			

5. If not effective on the date of filing, enter the effective date: 1) cannot be prior to nor medocument is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	fective date:	be the same a	s the
Signed this 14 day of October	20 <u>δ6</u> .		
Signature of Authorized Person: W	rtholog	·	
Printed Name: Kin Schmittendorf Title	MANAGER		
Fees: Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	ZOOB OCT 12 P 1: 39 SECRETARY OF STATE TALLAHASSEE, FLORIDA	FILED

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:		
25345 W. Newberray Rd Newberray Florich 32449	25345 W. Newberry Bd Newberry, Fi 32669		
Signature: (The Limited Liability Company cannot serve as its individual or another business entity with an active Florida registration.) The name and the Florida street address Lim Schm 3250 JE Florida street address GALMSVILLE	s of the registered agent are 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		

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..

We Switte Levy

Registered 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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGR	Kin Schmittendent 3250 SE 29 to Blid BAINESVILLE TO 32641			
mbrm	Judy HORNE 2327 NW CR 235 NEW BERRY FL 3469			
MGRM	TERRY Schmittendorf 3250 SE 29th Blad GOMNESVILLE FL FRANKI			
148-149-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	CRETARY LAHASSEE			
ARTICLE V: Effective date, if other than the da	(Use attachment if nevessary)			
(OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)				
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.) Lim Sumitten don't				
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)