# LB60111553

(Re	equestor's Name)	,
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

### **COVER LETTER**

**TO:** Registration Section Division of Corporations

	SUBJECT: ADVANCED EXTERI (Name of Resulting Florida)			
	The enclosed Certificate of Conversion, Articles of convert an "Other Business Entity" into a "Florida accordance with s. 608.439, F.S.	of Organization, and fees are submitted to a Limited Liability Company" in		
	Please return all correspondence concerning this n	natter to:		
	ANTHONY J. PESCE (Contact Person)  ADVANCED EXTERIORS C	OF BREVARD		
	575 EAST CRISAFULLI RO	AA		
	(Address)  MERRIT (SLAND, FL 3  (City, State and Zip Code)	<u>52953</u>		
For further information concerning this matter, please call:				
ANTHOUS OR	SANDRA FESCE at (	321 AS5-4378 (Area Code and Daytime Telephone Number)		
	Enclosed is a check for the following amount:	(Area Code and Daytine Telephone Number)		
	\$150.00 Filing Fees \$155.00 Filing Fees \$18	\$0.00 Filing Fees, ertified Copy  Certified Copy, and 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 P. O. Box 6327 Tallahassee, FL 32314		

### 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: ADVANCED EXTERIORS OF BREVARD			
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a SOLE PROPRIETORSHIP  (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 of FWORIDA  (Enter state, or if a non-U.S. entity, the name of the country)			
on OCT 1ST 2006 (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:			
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:			
(Enter Name of Florida Limited Liability Company)			

Page 1 of 2

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SECRETARY OF STATE

5. If not effective on the date of filing, enter the effective date: 200 (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 13TH day of 1001 20 00.
Signature of Authorized Person:
Printed Name: ANTHONY J. PESCETitle: MANACIER

## Fees:

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

Certificate of Status:

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

Page 2 of 2

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

ADVANCED EXTERIORS OF BREVARD LTD. Co
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or
"L.C.,")

Mailing Address:

**ARTICLE I - Name:** 

**ARTICLE II - Address:** 

Principal Office Address:

575 EAST CRISAFULLI RO MERRITT ISLAND, FL 32

Liability Company is:

The name of the Limited Liability Company is:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The Limited Liability Company cannot serve as its own Registered Agent. You must designate an ndividual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
ANTHONY J. PESCE
575 EAST CRISAFULLI ROAD
Florida street address (P.O. Box NOT acceptable)
MERRITT ISLAND FL 32953
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 (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 MGRM ANTHONY J. PESCE 575 EAST CRISAFILLI ROPD MERRIT ISLAND, FL 32953 MERRIT ISLAND, FL 32953 MERRIT ISLAND, FL 32953 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (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.)

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)