L06000118605

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u>_</u>

Office Use Only



800082390088

12/12/06--01031--020 **155.00

SECHERATOR STATE

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ECT: Accu-Ledger Tax &	Accounting, LLC
	, (Name of Result	ting Florida Limited Company)
conve		, Articles of Organization, and fees are submitted a "Florida Limited Liability Company" in
Please	e return all correspondence concer	ning this matter to:
Dav	id Stafseth	
	(Contact Person)	ALL 2100
Accı	u-Ledger Tax & Accountii	ng ng DEC
	(Firm/Company)	
137	61 Linden Drive	988 - 2 78 - 2
	(Address)	T T
Spri	ng Hill, FL 34609-5023	E FLORIDA TO STATE OF STATE Replication
	(City, State and Zip Coc	de) Dr. o
For fu	orther information concerning this	matter, please call:
Dav	id Stafseth	_{at (} 352 ₎ 686-4211
	(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclo	sed is a check for the following an	nount:
(\$25 fo & \$125	0.00 Filing Fees and Certificate of Status S for Articles Status	es \$\int \\$180.00\ \text{Filing Fees} \text{Certified Copy} \text{Certified Copy, and Certificate of Status}
Regist Divisi Clifto 2661	tration Section ion of Corporations n Building Executive Center Circle hassee, 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 chury infinediately prior to the infing	oi inis	
Certificate of Conversion is: Accu-Ledger Tax & Accounting	SIC	70 0 1-
(Enter Name of Other Business Entity)	26	冊
2. The "Other Business Entity" is a General Partnership	1979 - 1970 - 19	<u> </u>
(Enter entity type. Example: corporation, limited partnership, sole p general partnership, common law or business trust, etc.)		orship,
first organized, formed or incorporated under the laws of FLORIDA	유동	ىپ —
(Enter state, or if a non-U.S. entity, the name of the countr	y) -	CO
on January 17,1999		
(Enter date "Other Business Entity" was first organized, formed or in	ncorpor	rated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state of under the laws of which it is now organized, formed or incorporated:	or count	ry
4. The name of the Florida Limited Liability Company as set forth in the at Articles of Organization:	tached	. •
Accu-Ledger Tax & Accounting, LLC		_
(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 seffective date listed in the attached Articles of Olisted therein.)	ore than 90 days after t State; <u>AND</u> 2) must be	the same as tl	ine
Signed this 7th day of December	_20_06		
Signature of Authorized Person:	Stepuch	<u> </u>	: :
Printed Name: David Stafseth Title:	MGRM	ZOOL DEC 12 SECRETARY TALLAHASSE	
<u>Fees:</u>		2 P 3 18	i O
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTI	$\mathbf{C}\mathbf{I}$	E.	Ī	_	Na	m	e:
					7 1 4 4	333	

The name of the Limited Liability Company is:

Accu-Ledger Tax & Accounting, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office A	Address:	<u>Mailing Ad</u>	dress:		
13761 Linden Drive	;	same	=		
Spring Hill, FL 34609-5	6023	<u> </u>	ZE SE	8	
			تزح	<u></u>	1
				<u>E</u>	
ARTICLE III - R	egistered Agent, Regis	tered Office, & Re	gistered A	rgent's	}- -
Signature:			Termed		1 1
(The Limited Liability Condividual or another	ompany cannot serve as its own	Registered Agent. You m	ust designate	anU	-
	active Florida registration.)		25	پې	وستجور
The name and the	Florida street address of	the registered agen	t are?	8	
	David Stafseth				
	10470 Audie Bro	Name lok Drive			
	Florida street address (P.O. Box NOT acc	eptable)		
	Spring Hill	FL		_	
	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

Ghapter 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:

"MGR" = Manager "MGRM" = Managing Member			
MGRM	David Stafseth		
	10470 Audie Brook Drive		
	Spring Hill, FL 34608-8459		
	As 7		
	AHA DEC		
	SE 12		
	57		
			
	(Use attachment if necessary)		
	(000 0000000000000000000000000000000000		
CLE V: Effective date, if other than	the date of filing:		
ONAL)			
	ist be specific and cannot be more than five		
ess days prior to or 90 days after the	e date of filing.)		
REQUIRED SIGNATURE:			
RECORED SIGNATURE.			
<i># 1 ~ 2 e .</i>	laketh		
A described	authorized representative of a member.		
Signature of a member or an	anthorized representative of a member.		
Signature of a member or an	08.408(3), Florida Statutes, the execution		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)