# 600000000000

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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# **COVER LETTER**

TO: Registration Section Division of Corporations	
·	
SUBJECT: JESKE Alum.	inum LLC,
(Name of Re	sulting Florida Limited Company)
	on, Articles of Organization, and fees are submitted to a "Florida Limited Liability Company" in
Please return all correspondence conc	erning this matter to:
Raymond Hans Jesu (Contact Person)	ce
	<u></u>
(0 Box 1045 14465) (Address)	AMYS
(City, State and Zip C	37655 Code)
For further information concerning the	
Raymond Hars Jeske (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 & \$125 for Articles of Organization) \$155.00 Filing I and Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P. O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

### 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.

The name of the "Other Business Entity" immediately prior to the filing of this ertificate of Conversion is:
(Enter Name of Other Business Entity)
The "Other Business Entity" is a Sole Profile to Shiff  (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)  rst organized, formed or incorporated under the laws of Florida.
(Enter state, or if a non-U.S. entity, the name of the country)
(Enter date "Other Business Entity" was first organized, formed or incorporated)
If the jurisdiction of the "Other Business Entity" was changed, the state or country nder the laws of which it is now organized, formed or incorporated:  WA
The name of the Florida Limited Liability Company as set forth in the attached articles of Organization:  TESKE HUMINUM LLC,  (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
Page 1 of 2

5. If not effective on the date of filing, enter the effective date:
(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 30 day of March 2007.
Signature of Authorized Person: Rymand H Seske
Printed Name: Raymond H. JESKR Title: OWNER/President

# 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

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Jeske	ALUMINUM C	i,L,C,			
	s "Limited Liability Compar		Company" or their abl	oreviation "LLC," or	:
ARTICLE II - Ad The mailing addres Liability Company	ss and street address	of the prin	cipal office of th	e Limited	
Principal Office A	Address:		Mailing Addres	<u>s:</u>	
8159 NE, State	e Road 47	<del></del>	Po Box 10	145	•
HIGH SPRMSS		<del></del> <u>:</u> -	F13437179	<del>2</del>	• • •
Signature: (The Limited Liability Coindividual or another business entity with an a	egistered Agent, Recompany cannot serve as its concerning active Florida registration.)	own Registere	d Agent. You must de	signate an	
The name and the l	Florida street address	_	_	<b>:</b>	
	Raymond Her	ns Je	SKC		
	Raymond Has 8159 N.E. St	Name Wee Rock	147	·	i de la companya de La companya de la co
	Florida street addre			ble)	° de sur ∰er e
	HIGH SPRAGS,	ity, State, a	FL 37 <b>64</b> and Zip	3 - × sec	20071
above stated limit hereby accept capacity. I furthe the proper and c	Raymond	at the place egistered a th the prove of my duting as register 608, F.S	e designated in the gent and agree to isions of all statu es, and I am fam ared agent as pro	nis certificate, I o act in this tes relating to illiar with and vided for in	THAR -5 PH 12: 23
	_	_	amie (REQUIRE	(ע.	
	(CONTINU)	ED)			

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	Name and Address:
"MGRM" = Managing Member	
0	0.11
MUN	Roymond Hans Jeske
	4159 NE, STATE (COL) 41
	HIGH 3/1/193, FC-32643
NAL) ffective date is listed, the date must	be specific and cannot be more than five
REQUIRED SIGNATURE:  Signature of a member or an aut  (In accordance with section 608.4 of this document constitutes an aff	be specific and cannot be more than five ate of filing.)  thorized representative of a member.  108(3), Florida Statutes, the execution irmation under the penalties of perjury
ffective date is listed, the date must be stays prior to or 90 days after the date must be stays prior to or 90 days after the date must be stays prior to or 90 days after the date must be stays prior to or 90 days after the date must be stays prior to a final stay prior to or 90 days after the days after the date must be stays prior to or 90 days after the date must be stays p	be specific and cannot be more than five ate of filing.)  thorized representative of a member.  108(3), Florida Statutes, the execution irmation under the penalties of perjury ated herein are true.)
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\$ 5.00 Certificate of Status (Optional)