L07000034783

(Re	equestor's Name)	
(Ac	idress)	_
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	_	
,	polo	1-13967

Office Use Only



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2001 MAR 30 P 4: 05

SECRETARY OF STATE
ALLAHASSEE, FLORIOA

AL



March 21, 2007

MICHAEL LANGJAHR 1851 RICKENBACKER DR. SUN CITY CENTER, FL 33573

SUBJECT: SUN CITY CENTER FUNERAL HOME, LLC

Ref. Number: W07000013967

We have received your document for SUN CITY CENTER FUNERAL HOMES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing not than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 907A00019660

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Sun City Center Funeral I	Home, LL	С		
(Name of Resulting Flori				
The enclosed Certificate of Conversion, Article convert an "Other Business Entity" into a "Flor accordance with s. 608.439, F.S.	-			
Please return all correspondence concerning thi	s matter to:			
Michael Langjahr			·- #	
(Contact Person) Sun City Center Funeral Home, LL	С		2001 MAR 30 SECRETARY ALLAHASSEI	
(Firm/Company)			IAR ETA HAS	
1851 Rickenbacker Drive			30 SEE	ı
(Address)			F.S. D	ſ
Sun City Center, FL 33573			STA.	
(City, State and Zip Code)			05 10A	
For further information concerning this matter,	please call:			
Michael Langjahr at	813	634-9900		
(Name of Contact Person)		and Daytime Telephon	e Number)	
Enclosed is a check for the following amount:				
	\$180.00 Filing I I Certified Copy		y, and	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Registra Division P. O. Bo	NG ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314		

FILED

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: Sun City Center Funeral Home, Inc.	₽°°	<u>~</u> ;
(Enter Name of Other Business Entity)	LEC	
2. The "Other Business Entity" is a Corporation	RETA!	HAM F
(Enter entity type. Example: corporation, limited partnership, sole prop	prietor	ship
general partnership, common law or business trust, etc.)	뜻유	T
first organized, formed or incorporated under the laws of Florida	N X I S	Æ
(Enter state, or if a non-U.S. entity, the name of the country)	IDA JE	20
on January 1, 2006	•	
(Enter date "Other Business Entity" was first organized, formed or inco	orporat	ted)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or cunder the laws of which it is now organized, formed or incorporated:	country	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	ched	
Sun City Center Funeral Home, LLC		,
(Enter Name of Florida Limited Liability Company)	··	

Page 1 of 2

5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor m document is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days after the cases of the state; AND 2) must be the	date this same as the
Signed this 29th day of March		
Signature of Authorized Person: Printed Name: Michael Langjahr Title	Managing General	— Partner
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)	FILED 2001 MAR 30 P 4: C SECRETARY OF STATIONIC TALLAHASSEE, FLORIC

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:	
Sun City Center Funeral Home	, LLC	
(Must end with the words "Limited Liability Company, "L.C.,")	'Limited Company" or their abbreviation "LLC," or	
ARTICLE II - Address: The mailing address and street address of t Liability Company is:	he principal office of the Limited	
Principal Office Address:	Mailing Address:	
1851 Rickenbacker Drive	1851 Rickenbacker Drive	
Sun City Center, FL 33573	Sun City Center, FL 33573	
ARTICLE III - Registered Agent, Registing Signature: (The Limited Liability Company cannot serve as its own individual or another business entity with an active Florida registration.) The name and the Florida street address of Michael Langjah 1851 Rickenbac	Registered Agent. You must designate in SECRE TARY 0	7
100 L MICKELIDACI		

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

Sun City Center,

Florida street address (P.O. Box NOT acceptable)

City, State, and Zip

_{FL} 33573

Chapter 608, F.S..

istered 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Michael Langjahr	
	1851 Rickenbacker Drive	
	Sun City Center, FL 33573	
MGRM	Yvonne Langjahr	-
	1851 Rickenbacker Drive	<u> </u>
	Sun City Center, FL 33573	<u> </u>
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		107 118 141
		<u> </u>
) N
	(Use attachment if necess	2007/
	(Ose attachment if necess	iai y j
ARTICLE V: Effective date, if other than the (OPTIONAL) (If an effective date is listed, the date must	be specific and cannot be mo	
business days prior to or 90 days after the d	ate of ming.)	
REQUIRED SIGNATURE: Signature of a member or an approximation	thorized representative of a	member.
(In accordance with section 608. of this document constitutes an af	408(3), Florida Statutes, the ex	cecution
Michael Langjahr		
Typed or prin	ited 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)