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(Re	equestor's Name)	
(Ac	ldress)	
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(6)	ty/State/Zip/Phone	. 40
(CI	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE STATE OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Stinger Fiberglass	
	g Florida Limited Company)
The enclosed Certificate of Conversion, A convert an "Other Business Entity" into a accordance with s. 608.439, F.S.	rticles of Organization, and fees are submitted to "Florida Limited Liability Company" in
Please return all correspondence concernir	ng this matter to:
Artie Schricker	07 1111 70
(Contact Person)	
Stinger Fiberglass	
· (Firm/Company)	23
3945 Dairy Road	1
(Address)	
Titusville FL 32796	
(City, State and Zip Code)	
For further information concerning this ma	atter, please call:
Artie Schricker	at (321) 385-0040
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amo	unt:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\square\$ \$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy 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 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: stinger Fiberglass

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited liability partnership

(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 Florida (Enter state, or if a non-U.S. entity, the name of the country)

on June 1999

(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:

Brevard county FL

4. The name of the Florida Limited Liability Company as set forth in the attached **Articles of Organization:**

Stinger Fiberglass LLC

(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; 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 31 day of may 20 07
Signature of Authorized Person: Ab Alk
Printed Name: Artie Schricker 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

A I	RT	16	T T	C I	,	NΙΑ		_
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The name of the Limited Liability Company is:

Stinger Fiberglass 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 Address:	Mailing Address:
3945 Dairy Road	SAME
Tiyusville FL 32796	

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 individual or another

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Artie Schricker 3945 Dairy Road Florida street address (P.O. Box NOT acceptable)

Titusville FL 32

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:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Membe	er
mgrm	Susan Schricker
	3945 Dairy Rd
	Titusville FL 32796
	37
	(Use attachment if necessary) han the date of filing:
CLE V: Effective date, if other t	han the date of filing:
ONAL)	9
	must be specific and cannot be more than five
ss days prior to or 90 days after	r the date of filing.)
REQUIRED SIGNATURE:	
At A.1.1	2
Signature of a member or	an authorized representative of a member.
8	•
(1 1 1 1.1	400 400/3) El 11 G
	on 608.408(3), Florida Statutes, the execution as an affirmation under the penalties of perjury

Artie Schricker

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)