# L07000070796

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

Office Use Only



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Please give original submission date as file date.

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 1, 2020

CSC

SUBJECT: THE MCDONNELL GROUP LLC

Ref. Number: L07000070796

We have received your document for THE MCDONNELL GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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) 245-6050.

Letter Number: 420A00012899

Octavia L Simmons
Regulatory Specialist II Supervisor

### FILE FIRST

Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 339469 7482030 AUTHORIZATION COST LIMIT ORDER DATE : JUNE 30, 2020 ORDER TIME : 2:50 PM ORDER NO. : 339469-005 CUSTOMER NO: 7482030 DOMESTIC AMENDMENT FILING **CONVERSION FILING** NAME: THE MCDONNELL GROUP LLC EFFECTIVE DATE: \_ ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_ CERTIFIED COPY \_\_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

1201 Hays Street

CONTACT PERSON:

#### **COVER LETTER**

TO: Registration Division of 0			
SURTECT: THE MC	DONNELL GROUP LLC		
30b3EC1	Name of Florida	Limited Liability Comp	any
	es of Conversion and fo ompany" into an "Othe		
Please return all cor	respondence concernin	g this matter to:	
	Contact Person		
	Firm/Company		
	Address		
	City, State and Zip Code		
E-mail address: (to	be used for future annual	report notification)	
For further informat	ion concerning this ma	atter, please call:	
		at ()	
Name of Contact Person		Area Code and D	Daytime Telephone Number
Enclosed is a check	for the following amou	unt:	
S25.00 Filing Fee	S30.00 Filing Fee and Certificate of Status	\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
		Tallahassee, FL 32303	

CR2E106 (05/17)

#### **Articles of Conversion**

For

## Florida Limited Liability Company Jt. 30 Mi 7: 57

#### "Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:
The McDonnell Group LLC
Enter Name of Florida Limited Liability Company
2. The name of the "Converted or Other Business Entity" is:
The McDonnell Group LLC
Enter Name of "Converted or Other Business Entity"
3. The "Converted or Other Business Entity" is a Limited Liability Company  (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law o business trust, etc.)
organized, formed or incorporated under the laws of
The formation document is attached (if applicable).
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.
5. This conversion shall be effective in Florida on:
(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 of the conversion under the laws governing the "Other Business Entity.")
No. 100 to 1 and 1 and 1 at 1 the first of the comment of the comm

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

	ed or Other Business Entity" is an out-c s in Florida, the "Converted or Other Bu			
Department	following street and mailing address of of State may send and process served of Chapter 48.			
Street Address:	1201 Hays Street			
	Tallahassee, Florida 32301			
Mailing Address:	1201 Hays Street			
C	Tallahassee, Florida 32301			
	or Other Business Entity" has agreed to the amount to which such members are 05.1072, F.S.			
Signed this <u>30th</u>	day of	, 20		
Signature: Docusique	Must be signed by a Member or Authori	ized Representative		
Printed Name: Joh	n J. McDonnell III Title: Managir			
Fees: Filing Fee: Certified Co Certificate of	\$25.00 ppy: \$30.00 (Optional) of Status: \$5.00 (Optional)			

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