101000077195

(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:		

Office Use Only



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06/29/07--01030--028 **150.00

SECRETARY OF STATE

W1-12795



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 2, 2007

KAYE-ANN BAXTER 5220 S. UNIVERSITY DRIVE, STE C-110 DAVIE, FL 33328

SUBJECT: GLADES ROOFING, LLC

Ref. Number: W07000031097

We have received your document for GLADES ROOFING, LLC and your check(s) totaling \$150.00. 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 nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

We received your document on June 29, 2007.,

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 207A00042618

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Name of Resulting Florida Limited Company		
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.		
Please return all correspondence concerning this matter to:		
Kaye-Ann Baxter (Contact Person) Kaye-Ann Baxter, P.A. (Firm/Company)		
5220 S. University DW., Str. C-110 (Address)		
City, State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (954) 252-7293 (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 Fees and Certified Copy & Certified Copy, and Certificate of Status		
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 Tallahassee, FL 32314 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 <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 Entity" immediately prior to the filing of this		
Certificate of Conversion is:		
Ghades Roofing Company, Inc)100		
Certificate of Conversion is: (Enter Name of Other Business Entity) (Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a		
first organized, formed or incorporated under the laws of		
on Twe 14 1977. (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:		
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:		
(Enter Name of Florida Limited Liability Company)		

Page 1 of 2

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Signed this 28 day of June 20 07

Signature of Authorized Person:

Printed Name: Kaye-Ann Boxkx Title: 12tocnes and Agent

Fees:

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
(Must end with the words "Limited Liability Company, Limited "L.C.,")	1 Company" or their abbreviation "LLC," or
ARTICLE II - Address: The mailing address and street address of the pri Liability Company is:	ncipal office of the Limited
Principal Office Address:	Mailing Address:
424 Dr. Hartin Luther King Blud.	(Same)
Belle 6 6 de 5, 71 33430	
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Registe individual or another business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Kaye-Ann B Name 5220 S. Univer Florida street address (P.O.)	oxter, Esq. Sity Drv. Sk. C-110 Box NOT acceptable)
Davie City, State	FL 33328 , and Zip
Having been named as registered agent and to above stated limited liability company at the pla hereby accept the appointment as registered capacity. I further agree to comply with the pro the proper and complete performance of my diaccept the obligations of my position as regis Chapter 608, F.S.	ce designated in this certificate, I agent and agree to act in this ovisions of all statutes relating to ties, and I am familiar with and stered agent as provided for in
W X	70 -
Registered Agent's Sig	nature (REQUIRED)
(CONTINUED) Page 1 of 2	256 2003

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	Carl A. Wilson 424 Dr. Martin Luther Kins Bird Belle Glades, 72 33430
MGRM	Bruce C. Palmer 424 Dr. Martin Lither King Blud Belle Glades, 71 33430
MGRM	Dudley A. Brown 424 Dr. Martin Luther King Bird Belle Glades, 7133430
	(Use attachment if necessary)
(OPTIONAL) (If an effective date is listed, the date must b business days prior to or 90 days after the date is listed. REQUIRED SIGNATURE:	
- Cars	8
Signature of a member or an auth	norized representative of a member.
of this document constitutes an affin	08(3), Florida Statutes, the execution rmation under the penalties of perjury ed herein are true.)
Kaye-Ann Bo Typed or printe	ed name of signee
Typed or printe	ed name of signee
Filing Fees:	JUL CATA
\$125.00 Filing Fee for Articles of of Registered Agent \$ 30.00 Certified Copy (Optional \$ 5.00 Certificate of Status (Opt) Hi: 8: 5; ional)
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