L07000127027

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

Office Use Only



700263714387

09/10/14--01022--004 **30.00

2014 SEP 10 AM 10: 59

SEP 1 6 2814 J. BKUCE

COVER LETTER

то:	Registration S Division of C						
CHEL	ECT. Law Off	fice of John Owens,	LLC				
SUDU	EC1	Name of Florida	Limited Liability Comp	pany	-		
Limite		s of Conversion and fempany" into an "Other	• •				
Please	return all corr	espondence concernin	g this matter to:				
John	E. Owens						
		Contact Person					
Law (Office of John	Owens, LLC					
	· · · · · · · · · · · · · · · · · · ·	Firm/Company					
1123	State Route	3 North, #277					
		Address					
Gami	brills, MD 210)54					
	C	City, State and Zip Code					
		eofjohnowens.com			2014 SEP 10	ಹಾಗೆ _ಗ ಿ	
E	-mail address: (to	be used for future annual r	eport notification)		SET SET	e messeu	
For fu	rther informati	on concerning this ma	tter, please call:		100	l'estren	
John	Owens		at (904)	599-2555		Sada.	
N	ame of Contact P	erson	Area Code and	Daytime Telephone Nu	mber STA	ارد. پادرسههوري د د د د د د د د د د د د د د د د د د د	
Enclos	sed is a check t	for the following amou	int:): 59 ORIGIN	***************************************	
\$ 25	.00 Filing Fee	\$30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Certified Copy, a Certificate of Sta	ınd		
STRE	STREET ADDRESS: MAILING ADDRESS:						
Registration Section Registration Section							
				on of Corporations			
Clifton Building P. O. B		P. O. Box	6327				

Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

CR2E106 (07/14)

Articles of Conversion

For

Florida Limited Liability Company

Into

"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:		
Law Office of John Owens, LLC		
Enter Name of Florida Limited Liability Company		
2. The name of the "Converted or Other Business Entity" is:		
Law Office of John Owens, 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,	-	
organized, formed or incorporated under the laws of Maryland (Enter state or if a new LLS parties the name of the country)		
(Enter state, or it a non-old, the name of the country)	-	
On (Date of organization, formation or incorporation)		
and the formation document is attached (if applicable).	2014 SEP 10	4
4. The plan of conversion was approved by the converting Florida Limited Liability. Some Company in accordance with Chapter 605, F.S.		1
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.")	AM 10: 59	

- 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
 - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

1738 Gunwood Place Street Address: Crofton, MD 21114 1123 State Route 3 North, #277 Mailing Address: Gambrills, MD 21054 7. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. _day of August Signed this ___ Must be signed by a Member or Authorized Representative Printed Name: John E. Owens Managing Member Title: Fees: Filing Fee: \$25.00 Certified Copy: \$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

Page 2 of 2

2014 SEP 10 AM 10: 59