10800031702

(Re	questor's Name)	
(Ad	dress)	
(
(Ad	dress)	
(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	·····
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		,
1		
CXXV.		

Office Use Only



500121309495

93/27/08--01031--017 ++185.00

DIVISION OF CORPORATION OF CORPORATION OF CORPORALION OF CORPORALI

G. MCLEOD
MAR 2 8 2008

EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: SYNERGY ONE (Name of Resulting Florida Limit	ted Company)
The enclosed Certificate of Conversion, Articles of Or convert an "Other Business Entity" into a "Florida Lin accordance with s. 608.439, F.S.	
Please return all correspondence concerning this matte	er to:
Edward Romero	<u> </u>
Edward Romero (Contact Person) SYNERGY ONE, LLC (Firm/Company)	
10531 CORY LAKE DR. (Address)	
TAMPA FL, 3364 (City, State and Zip Code)	7
For further information concerning this matter, please	call:
Edward Romero at (91) (Name of Contact Person) (Area	7 , 817 . 7967
Enclosed is a check for the following amount:	Code and Daytime Telephone Number)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of and Certificate of Status	
Registration SectionRegistration SectionDivision of CorporationsDiClifton BuildingP.	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 allahassee, FL 32314

AFILED SECRETARY OF STATE BIVISION OF CORPORATION

08 MAR 27 PM 2: 35

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.

	siness Entity" immediately prior to the filing of this
Certificate of Conversion is:	SYNERGY ONE INC.
(Ente	er Name of Other Business Entity)
2. The "Other Business Entity"	"isa COPPORATION.
(Enter entity type. Example	e: corporation, limited partnership, sole proprietorship ership, common law or business trust, etc.)
first organized, formed or inco (Enter state, or i	rporated under the laws of FUFLDA. if a non-U.S. entity, the name of the country)
on MAY 16, 20 (Enter date "Other Busines	<u>07</u> . ss Entity" was first organized, formed or incorporated)
	ther Business Entity" was changed, the state or country ow organized, formed or incorporated:
N/A.	
4. The name of the Florida Lin Articles of Organization:	nited Liability Company as set forth in the attached
5	YNERGY ONE, LLC c of Florida Limited Liability Company)
(Enter Name	e of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the effective date: 1) cannot be prior to nor modocument is filed by the Florida Department of Seffective date listed in the attached Articles of Oblisted therein.)	ore than 90 days after the date this State; <u>AND</u> 2) must be the same as the
Signed this 25 day of MARCH	_20 <u>08</u>
Signature of Authorized Person:	
Printed Name: ElWARD ROMERO Title:	PRESIDENT
<u>Fees:</u>	·
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Lin	nited Liabilit	y Company	is:	
Sy	NERGY	ONE,	LLC	
(Must end with the words "LLC.")				L.L.C.," or the designation
ARTICLE II - Add The mailing address Liability Company i	and street ac	ldress of the	principal o	ffice of the Limited
Liability Company i				

10531 CORY LAKE Dr.	SAME AS
TAMPA FL 33647	PRINCIPAL OFFICE

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.)

ARTICLE I - Name:

Principal Office Address:

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

EdWARD	KOM	ERO		
	Name			
10531	CORY	LAKE	Dr	
Florida street add	dress (P.O.	Box <u>NOT</u> a	ecceptable)	
TAMY	PA	FL	3364	17.
	City, State	, and Zip		

Mailing Address:

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)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
	·
·	
	·
	-
	•
	(Use attachment if necessary)
	(Ose attachment if necessary)
CLE V: Effective date, if other than the	date of filing:
	date of filing:(OPTIONAL)
ffective date: 1) cannot be prior to no ent is filed by the Florida Departmen ective date listed in the attached Co listed therein.)	date of filing: (OPTIONAL) or more than 90 days after the date t nt of State; AND 2) must be the same
fective date: 1) cannot be prior to neent is filed by the Florida Department ctive date listed in the attached Co	date of filing: (OPTIONAL) or more than 90 days after the date t nt of State; AND 2) must be the same
fective date: 1) cannot be prior to no ent is filed by the Florida Department ective date listed in the attached Collisted therein.) REQUIRED SIGNATURE:	date of filing:(OPTIONAL) or more than 90 days after the date t nt of State; <u>AND</u> 2) must be the same
ffective date: 1) cannot be prior to not ent is filed by the Florida Department ective date listed in the attached Collisted therein.) REQUIRED SIGNATURE: Signature of a member or an aut (In accordance with section 608.4 of this document constitutes an aff	date of filing: (OPTIONAL) or more than 90 days after the date that of State; AND 2) must be the same ertificate of Conversion, if an effect
Signature of a member or an aut (In accordance with section 608.4 of this document constitutes an aff that the facts sta	(OPTIONAL) or more than 90 days after the date to the of State; AND 2) must be the same ertificate of Conversion, if an effect horized representative of a member. 08(3), Florida Statutes, the execution irmation under the penalties of perjury

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)