# W8000055538

(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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2008 JUN -4 PM 1: 08
SECRETARY OF STATE
AND SEFF FINDING

T. CLINE

JUN - 5 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Ann Nichols Cleaning Servic (Name of Resulting Florida	
The enclosed Certificate of Conversion, Articles of convert an "Other Business Entity" into a "Florida accordance with s. 608.439, F.S.  Please return all correspondence concerning this response.	of Organization, and fees are submitted to a Limited Liability Company" in
Charlotte O. Davis, EA (Contact Person)	
Professional Tax Consultants, Inc.	· <del></del>
(Firm/Company)	
2225 E Edgewood Dr Ste 3	
(Address)	<del></del>
Lakeland, FL 33803	
(City, State and Zip Code)	<del></del>
,	Zas
For further information concerning this matter, pl	ease call: SECRETARN SECRETARN SECRETARN SS
Ann Nichols at (	863 ) 398-6455
	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:	(Area Code and Daytime Telephone Number)
	30.00 Filing Fees Status Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	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:  Ann Nichols Cleaning Service, Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Corporation</u> .  (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, USA
(Enter state, or if a non-U.S. entity, the name of the country)
on 02/16/2005 .
(Enter date "Other Business Entity" was first organized, formed or incorporated)
(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:
Ann Nichols Cleaning Service, LLC
(Enter Name of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor m document is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days after the date this State; <u>AND</u> 2) must be the same as the
Signed this day of	_20 <b>_0%</b>
Signature of Authorized Person:	Nichols
Printed Name: Ann Nichols Title	: Owner
Fees:	
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

SECRETARY OF STATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	any is:		
Ann Nichols Cleaning Service, I (Must end with the words "Limited Liability Company "LLC.")		breviation "L.L.C.," or the designation	
ARTICLE II - Address: The mailing address and street address of Liability Company is:	f the pr	incipal office of the Limited	
Principal Office Address:		Mailing Address:	
2514 Lawndale		PO Box 1034	
Lakeland, FL 33801	_ _ 0	Eaton Park, FL 33840-1034	
	_	<del></del>	
Signature: (The Limited Liability Company cannot serve as its ovindividual or another business entity with an active Florida registration.)  The name and the Florida street address of the Professional Tax Constant Const	of the rultants,	registered agent are:	
2225 E Edgewood Dr S		Pay NOT accentable)	
r fortda street addres	s (P.O.	Box NOT acceptable)	
Lakeland		FL 33803 PEC 28	
Cit	ıy, Stat	e, and Zip	
Having been named as registered agent above stated limited liability company a hereby accept the appointment as re- capacity. I further agree to comply with the proper and complete performance accept the obligations of my position Chapter	t the pl gistered h the pr of my a as reg	ace designated in this certificate, I  d agent and agree to act in this  vovisions of all statutes relating to  uties, and I am familiar with and  istered agent as provided for in	There is a series

(CONTINUED)

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

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

MCD! - Managen			
'MGR" = Manager 'MGRM" = Managing Member			
MORIN			
Ann Nichols	PO Box 1034  Eaton Park, FL 33840-1034		
	Editi Park, FL 33040-1034		
	-		
	(Use attachment if necessary)		
	(Use attachment if necessary)		
LE V: Effective date, if other than th	ne date of filing:		
LE V: Effective date, if other than th	ne date of filing: (OPTIONAL)		
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ective date: 1) cannot be prior to nt is filed by the Florida Departm	ne date of filing:  (OPTIONAL)  nor more than 90 days after the date this tent of State; AND 2) must be the same as		
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)