W8000010275

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

Office Use Only



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07/21/08--01039--002 **150.00



T. CLINE
JUL 2 2 2008

EXAMINER

COVER LETTER

Division of C						
SUBJECT:	TERRY SHANE					1 .
•	(Name of Resulting	Florida Lin	nited Com	pany)		
	cate of Conversion, Ar usiness Entity" into a " 08.439, F.S.					to.
Please return all corr	espondence concernin	g this mat	ter to:			
TERRY S	HANER					
	(Contact Person)					
TERRY SI	HANER, LLC					
	(Firm/Company)					
5100 SE 1	86TH AVE.					
	(Address)					
OCKLAWA	HA, FL 32179				,	
	City, State and Zip Code)			•		
For further informati	on concerning this ma	. 05		625-7492	er Te con	45
(Name of Conta	,			nd Daytime Telepl	none Number)	#2F9
Enclosed is a check if	or the following amou	int:				JUL 2
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.0 and Certi			Filing Fees, opy, and of Status	PH 2: 19
STREET ADDRES	S:			NG ADDRESS	;	
Registration Section				tion Section	_	
Division of Corporat Clifton Building	ions		Division P. O. Bo	of Corporation	S	
2661 Executive Cent	er Circle			see, FL 32314		
Tallahassee, FL 323					-	
				- -		
		F . 25 %	- A .;			

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: TERRY SHANER, 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 (Enter state, or if a non-U.S. entity, the name of the country)
on 04/17/2006
(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:
TERRY SHANER, LLC
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: (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 listed in the attached Articles of Organization, if an effective date is listed therein.)

Signed this _	day of	20	
Signature of	Member or Authorized Representa	ative of Limited Liability	Company:
Signature of Printed Name	Member or Authorized Representative: TERRY SHANER	e: Jun L	hane
Signature(s)	on behalf of Other Business Entity:	See below for required sign	nature(s).]
Signature: /	Jan L Shave		
Printed Name	TERRY SHANER	Title: PRESIDENT	
Signature:			
	× <u> </u>		
Signature:			
Printed Name	:	Title:	
Signature:			
Printed Name		Title:	
Signature:			
Printed Name		Title:	
Signature:			
Printed Name		Title:	一
If Florida Co			
	Chairman, Vice Chairman, Director, or r Officers have not been selected, an In-		2
	·		平 平
	eneral Partnership or Limited Liabili one General Partner.	ty Partnership:	2012
· ·			F 5
	mited Partnership or Limited Liabili ALL General Partners.	ty Limited Partnership:	
Ail others: Signature of a	an authorized person.		
Fees:			
Certif	ficate of Conversion:	\$25.00	
	for Florida Articles of Organization:	\$125.00	
	fied Copy: ficate of Status:	\$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Lin	ne: mited Liability Company is:			
	TERRY SHANER, L	LC		
(Must end with the words "LLC.")	"Limited Liability Company," the abb	reviation "L.L.C.," or the design	nation	
ARTICLE II - Ad The mailing addres Liability Company	s and street address of the pri	incipal office of the Limi	ited	
Principal Office A	ddress:	Mailing Address:		
5100 SE 186TH AVE	+	5100 SE 186TH AVE		
OCKLAWAHA, FL 32	2179	OCKLAWAHA, FL 3217	<u>'9 </u>	
Signature: (The Limited Liability Coindividual or another	egistered Agent, Registered impany cannot serve as its own Registration.)		•	
The name and the F	lorida street address of the re	egistered agent are:		623 623 623 624
	TERRY SHANER			= 1
	Name			L Maries
	5100 SE 186TH AVE.		CV T	<u></u>
	Florida street address (P.O.	Box NOT acceptable)		
	OCKLAWAHA	FL 32179	(0.5)	~ <u>~</u>
	City, State	, and Zip	क्षेत्र हा	61

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)
Page 1 of 2

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	Name and Address:
"MGRM" = Managing Member	
MGR	TERRY L SHANER
	5100 SE 186TH AVE.
	OCKLAWAHA, FL 32179
· · · · · · · · · · · · · · · · · · ·	
	(Use attachment if necessary)
	`
Tective date: 1) cannot be prior to a not is filed by the Florida Departme	(OPTIONAL) nor more than 90 days after the date this ent of State; <u>AND</u> 2) must be the same as Certificate of Conversion, if an effective
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