L08000 117585

(Requestor's Name)	
(Address)	
(Address)	7 (
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
3F11FC	CTIVE DATE_



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LADA STATE

Office Use Only

B. KOHR

DEC 3 0 2008

EXAMINER

PILLED

PROFESTATE

LIVATIANTE PROFESTATE

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12-30-08

NAME:

THE HORSELY COMPANY

TYPE OF FILING: CONVERSION-

PLEASE NOTE EFFECTIVE D

COST:

\$180

RETURN: CERTIFIED COPY

ACCOUNT: FCA0000000015

AUTHORIZATION:

EFFECTIVE DATE 1231

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.	**
I. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: THE HORSLEY COMPANY	
(Enter Name of Other Business Entity) 2. The "Other Business Entity" is a corporation CV + UUUI 428	-
2. The "Other Business Entity" is a corporation	
(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 October 15, 2004	
(Enter date "Other Business Entity" was first organized, formed or incorporated)	
 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: 	
n/a	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
THE HORSLEY COMPANY, LLC	
(Enter Name of Florida Limited Liability Company)	

Page 1 of 2

5. If not effective on the date of filling, enter the effective date: <u>December 31, 2008</u> .
(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 <u>23</u> day of _	December	20_08	
Signature of Authorized Person	Macha	Moldons	_
Printed Name: MANNEL MI	ALAONSMI Titl	e: <u> </u>	

Fees:

\$25.00

Certificate of Conversion:
Pees for Florida Articles of Organization:
Certified Copy:
Certificate of Status:

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAI

ARTICLE I - Name: The name of the Limited Liability Company is:	
THE HORSLEY COMPANY, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	·
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liabilit	ty Company is:

Trincipal Office Address.	Wanting Address:
476 Southridge Industrial Drive	Same
Tavares, FL 32778-9118	

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.)

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

National Registered Agents, Inc.
Name
2731 Executive Park Drive, Suite 4
Plorida street address (P.O. Box NOT acceptable)
Weston, FL 33331
City, State, and Zip

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.

National Registered Agents, Inc.

Registered Agent's Signature (REQUIRED)

Tiniesha Clark, Assistant Secretary

(CONTINUED) Page 1 of 2

"MGR" = Manage		Name and Address:
"MGRM" = Mana	ging Member	
MGRM		G&T Conveyor Company, Inc.
	_	476 Southridge Industrial Drive
•		Tavares, FL 32778-9118
	-	· · · · · · · · · · · · · · · · · · ·
	_	

	•	
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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

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