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PICK-UP Q WAIT MAIL
(Business Entity Name)
(Document Number)
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Cartified Capies Cartificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

JAN - 9 2009

EXAMINER



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SECRETARY OF STATE
DIVISION OF CORPORATION

COVER LETTER

Division of Co		^	
SUBJECT: E	(Name of Resulting	ED PER INTS Florida Limited Company)	S,LLC
	siness Entity" into a "l	ticles of Organization, Florida Limited Liabili	and fees are submitted to ity Company" in
Please return all corre	espondence concerning	this matter to:	
GRAN	T REN	110	
_ €PI	(Firm/Company)		
220.D	(Address)	24 <u>AJOCCU</u>	s Bus
DEL	Address) F	Z 32	2720
(C	City, State and Zip Code)		
For further information	on concerning this mat	ter, please call:	
Genty (Name of Contact	RENNE ct Person)	at (380) 7	47 176 ytime Telephone Number)
Enclosed is a check for	or the following amou	nt:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	Certified Copy, and Certificate of Status
STREET ADDRESS Registration Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle	MAILING A Registration S Division of C P. O. Box 632 Tallahassee, I	Section orporations 27

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: ENGINEELED PERMITS, INC		
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a <u>Coe Poe Arts Co</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(Enter state, or if a non-U.S. entity, the name of the country) on	IL 60	SECH
(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:	09 JAN -7 PM 1: 08	11.62, 0.5800, 40 K 11.64 T. 10 A.SVI.34 0.311.5
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: ENGINEELED DELMITS, LLC. (Enter Name of Florida Limited Liability Company)		T.
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		·~ 4

Signed this 5 day of JANUARY 2009.
Signature of Member or Authorized Representative of Limited Liability Company:
Signature of Member or Authorized Representative: Printed Name: Title: MGR
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]
Signature: Printed Name: GEANT RENNE Title: DEST
Printed Name: (300) Title: DFS
Signature: MICHEAL WOJUNIAK Title: DV
Signature:
Printed Name: Title:
Signature:
Printed Name: Title:
Signature:
Printed Name: Title:
Signature:
Signature: Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of <u>ALL</u> General Partners.
All others: Signature of an authorized person.
Fees:
Certificate of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (Optional) Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CC1 C.1	Name:	
The name of th	e Limited Liability Company	Flichida Division रा एक्का अवस्थितः
ENS	NEFREN F	DERMITS. LLC
(Must end with the v "LLC.")	words "Limited Liability Company," the	abbreviation "L.L.C.," or the designation
ARTICLE II - The mailing ad Liability Comp	dress and street address of the	principal office of the Limited
Principal Offic	ce Address:	Mailing Address:
DELAN	South Work AND R	Sub AMG
Signature: (The Limited Liabili individual or anothe business entity with	ity Company cannot serve as its own Reg r h an active Florida registration.)	tion of the section o
The name and	the Florida street address of the	e registered agent are:
	GRANT	KENNG
		me O. Box NOT acceptable)
	DECAND	FL 32720 rate, and Zip
	City, St	aie, and Zip
above stated l hereby acc capacity. I fu the proper a	named as registered agent and imited liability company at the pept the appointment as register arther agree to comply with the nd complete performance of my	to accept service of process for the place designated in this certificate, I red agent and agree to act in this provisions of all statutes relating to duties, and tam familiar with and egistered agent as provided for in
above stated l hereby acc capacity. I fu the proper a	named as registered agent and imited liability company at the gept the appointment as register with er agree to comply with the nd complete performance of my obligations of my position as re	to accept service of process for the place designated in this certificate, I red agent and agree to act in this provisions of all statutes relating to duties, and tam familiar with and egistered agent as provided for in

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGR TLANT RENNE Z20-D SATH WOONAND BUID DELAND R Z2120 MARM PARICK LUTLEDGE 220-D SATH WOONAND BUID DELAND R Z2120 THOMAS B LEYTHAM SO STATE STEPPET MOLT PELLER, UT OSOO 2 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (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

REQUIRED SIGNATURE:

date is listed therein.)

Signature of a member or an authorized representative of a member.

the effective date listed in the attached Certificate of Conversion, if an effective

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

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)

Page 2 of 2