# 10900034726

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

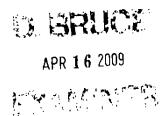
Office Use Only



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SECRETARY OF STATE
TALLAHASSEE FINGE



## **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: Edmunds Enterp	orises, LLC Resulting Florida Limit	ed Company)		<b>(+</b>	L
The enclosed Certificate of Convection convert an "Other Business Entity accordance with s. 608.439, F.S.				itted 1	to
Please return all correspondence c	oncerning this matte	r to:			
Terence J. Edmunds					
(Contact Pers	son)				
Edmunds Enterprises of America, Inc					
(Firm/Compa	iny)				
305 Stillbrook Trl			<u> </u>	<u>₹</u> ∽	0
(Address			ŗ	-C3	9 A
Enterprise, FL 32725			5	EM -	PR
(City, State and Z	ip Code)		<u>.</u>	230	5
( ==== ================================			ָרָ ני	20	<u>~</u>
For further information concerning	g this matter, please	call:	יר (ע <u>א</u>	FSIA	09 APR 15 PH12: 03
Terence J. Edmunds	at ( 386	) 479-9	709	- F	ಹ
(Name of Contact Person)			ytime Telephone Nun	ıber)	-
Enclosed is a check for the follow	ng amount:				
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  ■ \$155.00 Fil and Certificate Status			\$185.00 Filing Fe Certified Copy, and Certificate of Status		
STREET ADDRESS:	M	AILING A	DDRESS:		

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

#### **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.

Certificate of Conversion is: Edmunds Enterprises of America, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation 10000047347
(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 5/8/2000 .
(Enter date "Other Rusiness Entity" was first organized, formed or incorporated).
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country ART 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:
Edmunds Enterprises, 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 16 day of March	20 09 .
Signature of Member or Authorized Representa	ntive of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: Terence J. Edmunds	Title: President
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).
Signature: Jacob Amunds Printed Name: Terence J. Edmunds	_ Title: President
Printed Name: Terence J. Edmunds Signature: Mall S. Edmu	ands
Printed Name: Charlon S. Edmunds	Title: Vice President
Signature:Printed Name:	Title
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	Title
	_ Thic.
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Chairman, Vice Chairman, Director, or C	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	IS PHIZ: 03 SEE, FLORIDA
Fees:	Y 03
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

**ARTICLE I - Name:** 

"LLC.")	ords "Limited Liability Company	"the abbreviation "L.L.C.," or the designatio	n
ARTICLE II -		Stha muimainal affice of the Limited	1
Liability Compa		the principal office of the Limited	ı
Principal Offic	e Address:	Mailing Address:	
305 Stillbrook Trl	[	same	•
Enterprise, FL 32	2725-2460		
Signature:		istered Office, & Registered Age	···
<b>Signature:</b> (The Limited Liabilit individual or another business entity with	ty Company cannot serve as its own an active Florida registration.)	istered Office, & Registered Age on Registered Agent. You must designate and Agent are:	09 APR 15
<b>Signature:</b> (The Limited Liabilit individual or another business entity with	ty Company cannot serve as its own an active Florida registration.)	of the registered agent are:	09 APR 15 PH
<b>Signature:</b> (The Limited Liabilit individual or another business entity with	ty Company cannot serve as its own an active Florida registration.)  he Florida street address of the Terence J. Edmunds	of the registered agent are:	O9 APR 15 PH 12:
<b>Signature:</b> (The Limited Liabilit individual or another business entity with	ty Company cannot serve as its own an active Florida registration.)  he Florida street address of the Terence J. Edmunds  305 Stillbrook Trl	of the registered agent are:	09 APR 15 PH
<b>Signature:</b> (The Limited Liabilit individual or another business entity with	ty Company cannot serve as its own an active Florida registration.)  he Florida street address of the Terence J. Edmunds  305 Stillbrook Trl	of the registered agent are:  Name	O9 APR 15 PH 12:

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..

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

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:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Terence J. Edmunds
	305 Stilbrook Trl
	Enterprise. FL 32725-2460
	<del></del>
	(Use attachment if necessary)
IFV. Effective data if other the	•
<b>LE V:</b> Effective date, if other tha	n the date of filing:
	n the date of filing: (OPTIONAL)
fective date: 1) cannot be prior	n the date of filing:  (OPTIONAL)  to nor more than 90 days after the date this
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fective date: 1) cannot be prior ent is filed by the Florida Depar ctive date listed in the attache	n the date of filing: (OPTIONAL)  to nor more than 90 days after the date this rtment of State; AND 2) must be the same as
fective date: 1) cannot be priorent is filed by the Florida Deparenties date listed in the attaches isted therein.)	n the date of filing: (OPTIONAL)  to nor more than 90 days after the date this rtment of State; AND 2) must be the same as
Fective date: 1) cannot be prior nt is filed by the Florida Deparctive date listed in the attache isted therein.)  REQUIRED SIGNATURE:	(OPTIONAL)  to nor more than 90 days after the date this rtment of State; AND 2) must be the same as ed Certificate of Conversion, if an effective
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fective date: 1) cannot be priorent is filed by the Florida Departed in the attached isted therein.)  REQUIRED SIGNATURE:  Signature of a member or as	(OPTIONAL)  to nor more than 90 days after the date this rtment of State; AND 2) must be the same as ed Certificate of Conversion, if an effective nauthorized representative of a member.
fective date: 1) cannot be prior ent is filed by the Florida Departetive date listed in the attached isted therein.)  REQUIRED SIGNATURE:  Signature of a member or an (In accordance with section of the prior to be prior to	n the date of filing:  (OPTIONAL)  to nor more than 90 days after the date this retment of State; AND 2) must be the same as ed Certificate of Conversion, if an effective n authorized representative of a member.
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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)

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