# L09000040824

## STOKES

LAND GROUP

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(Business Entity Name)

(Document Number)

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Certificates of Status \_

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S. HAWKES

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EXAMINER

#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: KUNKEL SLG, L (Name of Result	LC	
(Name of Result	ing Florida Limited Company)	
	Articles of Organization, and fees are submitted to a "Florida Limited Liability Company" in	
Please return all correspondence concern	ning this matter to:	
TOHN C. KUNKEL— (Contact Person)  KUNKEL—SLG, LLC (Firm/Company)  553 HONEY LOCUST LN (Address)		
553 HONEY LOCUST LN (Address)		
PONTE VECCEA BEACH, FL 3 (City, State and Zip Cod		
For further information concerning this		
Name of Contact Person)	at ( 904 ) 482-1130 (Area Code and Daytime Telephone Number)	
(Name of Contact Person)	(Area Code and Daytime Telephone Number)	
Enclosed is a check for the following am	nount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fee and Certificate of Status	s and Certified Copy	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

### **Certificate of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

8 Th. 23 Ph. 20 Oc. 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:
KUNKEL SLG, LTO. (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED PRETARESHIP A05-11.  (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 FLOZEDA  (Enter state, or if a non-U.S. entity, the name of the country)
on 12/30/04 . (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:
N/R
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
KUNKEL SLG, LLC (Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: N/K  (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.)

t e			
Signed this 15th day of HREEL	20 09		
Signature of Member or Authorized Representa	tive of Limited Liability Co	mpany:	
Signature of Member or Authorized Representative Printed Name: Solla C. Kunker	Tirle:		
Signature(s) on behalf of Other Business Entity: I. By: Kunker Municipally, Lac. As G.P. of E.	See below for required signa	iture(s).]	
Printed Name: KUNKG	Title: PESEAGNT		0
Signature: Whe whe		ALC:	
Printed Name: John C. KUNKB	Title:	LENGTE	PARTON
By: John C. Kings TPLENOCABLE TRUST Signature: Taralle J. Kunlue			
Printed Name: NATALIE T. KUNKEL	Title: TRUSTFE	<u>(,</u>	
		Ţ,	
Signature:Printed Name:	Title		製物の
Frinted Name:			***
Signature:Printed Name:	· · · · · · · · · · · · · · · · · · ·		
Printed Name:	_ Title:	<del> </del>	
Signature:			
Printed Name:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc.			
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:		
All others: Signature of an authorized person.			
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)		

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
is: 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
e abbreviation "L.L.C.," or the designation		
e principal office of the Limited		
Mailing Address:		
553 HONEY LOCUST LN		
-		

## 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:

Name

4315 PABLO OAKS CT, STE #1

Florida street address (P.O. Box NOT acceptable)

JAKSONYELLE, FL 32224

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**.

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 "MGRM" = Managing Member	Name and Address:
MGRM	KUNKEL MANAGEMENT LLC 553 HONEY LOCUST LANE PONTE VEDOLA BEACH, FI. 32082
	23
	200
	(Use attachment if necessary)
RTICLE V: Effective date, if other than the The effective date: 1) cannot be prior to no ocument is filed by the Florida Departme e effective date listed in the attached Cate is listed therein.)	(OPTIONAL) nor more than 90 days after the date this nt of State; <u>AND</u> 2) must be the same as
REQUIRED SIGNATURE:  Signature of a member or an au	Parschent of Kunker Management, LLC thorized representative of a member.
	408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.)
TOHN C. KUNKED Typed or prin	ted 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)
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