# L09000058249

•
(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2000)
(Document Number)
Certified Copies Certificates of Status
Out of the standing of the sta
Special Instructions to Filing Officer:

Office Use Only



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T. HAMPTON
JUN 1 6 2009

EXAMINER

# **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT: NEW S	STEP COMMUNI (Name of Resulting			
	siness Entity" into a "			nd fees are submitted to y Company" in
Please return all corre	espondence concerning	g this matter to:		
BUESOUNQ C DREW	(Contact Person)		<u>-</u>	
NEW STEP COMMUNI	•		_	
	(Firm/Company)			
7030 ROLLO ROAD			_	
	(Address)			
JACKSONVILLE, FL 3	2205			
	City, State and Zip Code)		-	
For further information	on concerning this ma	tter, please call:		
MARY L ROBERTS EA		at ( <u>904</u>	) 781-10	
(Name of Contact Person)		(Area Code	and Day	time 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 and Certified Cop		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registr Divisio P. O. B	ration Son of Co Sox 632	orporations

### **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:
NEW STEP COMMUNITY HOME INC
(Enter Name of Other Business Entity)
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 06/29/2005 (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:
NO CHANGE .
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
NEW STEP COMMUNITY HOME LLC
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: 06/15/2009
(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; <u>AND</u> 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 5TH	day of JUNE	20 09 .	
Signature of Memb	er or Authorized Rej	presentative of Limited Liabilit	y Company:
Signature of Membe Printed Name: <u>BUES</u>	er or Authorized Repre-	sentative: Suesoung) Title: MGRM	Callie D
Signature(s) on beha		Entity:  See below for required	signature(s).]
Signature: Sues	ounal Collie	Drew	
Printed Name: BUES	OUNQ C DREW	Title: PRESIDENT	
Signature: Lan	ell Li Drev		
Printed Name: DARR	ELL L DREW	Title: VICE PRESIDEN	Τ
Signature:	·		
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
		Title:	
Signature:			
Printed Name:		Title:	
<u>If Florida Corporati</u>	on:		
	n, Vice Chairman, Dire	ctor, or Officer.	
		d, an Incorporator must sign.	
If Florida Conoral D	antnanchin an Limitad	Liability Partnership:	
Signature of one General	eral Partner.	Liability Partnership:	
If Florida I in ited D		T. C. D. CHALLET C. A. A. D. A. B. S.	
Signatures of ALL G		Liability Limited Partnership:	
All others: Signature of an author	rized person.		
Fees:			

\$25.00

\$125.00

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

Certificate of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

NEW STEP COM (Must end with the words "Limit "LLC.")		E LLC ne abbreviation "L.L.C.," or the designation	<u> </u>
ARTICLE II - Address The mailing address and Liability Company is:	•	e principal office of the Limited	
Principal Office Addres	<u>ss:</u>	Mailing Address:	
2403 LANE AVENUE SOU	TH	7030 ROLLO ROAD	
JACKSONVILLE, FL 3221	0 🗖	JACKSONVILLE, FL 32205	
ADTICLE III Decise	mod A mond D c =!=4	Office & Desirement	
Signature: (The Limited Liability Company individual or another business entity with an active Fl The name and the Florida	cannot serve as its own R orida registration.) a street address of t	ered Office, & Registered Agent egistered Agent. You must designate an the registered agent are:	09 JUN 15
Signature: (The Limited Liability Company individual or another business entity with an active Fl The name and the Florida	cannot serve as its own R orida registration.) a street address of t ESOUNQ C DREW	egistered Agent. You must designate an	09 JUN 15
Signature: (The Limited Liability Company individual or another business entity with an active Fl  The name and the Florida  BUS	cannot serve as its own R orida registration.) a street address of t ESOUNQ C DREW	egistered Agent. You must designate an	09 JUN 15 PH12: 1
Signature: (The Limited Liability Company individual or another business entity with an active Fl  The name and the Florida  BUI  703	cannot serve as its own R orida registration.) a street address of t ESOUNQ C DREW N O ROLLO ROAD	egistered Agent. You must designate an	09 JUN 15
Signature: (The Limited Liability Company individual or another business entity with an active Fl  The name and the Florida BUI  703  Flori	cannot serve as its own R orida registration.) a street address of t ESOUNQ C DREW N O ROLLO ROAD	egistered Agent. You must designate an he registered agent are:	09 JUN 15 PH12: 1

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	BUESOUNQ C DREW 7030 ROLLO ROAD JACKSONVILLE, FL 32205
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the date (The effective date: 1) cannot be prior to nor document is filed by the Florida Department the effective date listed in the attached Cerdate is listed therein.)	(OPTIONAL)  more than 90 days after the date this of State; AND 2) must be the same as
REQUIRED SIGNATURE:  Signature of a member or an author	ma Callie Drew of a member.
(In accordance with section 608.408 of this document constitutes an affire that the facts states	B(3), Florida Statutes, the execution nation under the penalties of perjury

BUESOUNQ C DREW

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)

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