109000018879

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
·	
(Business Entity Name)	
(Document Number)	
•	
Certified Copies Certificates of Statusi	
Special Instructions to Filing Officer:	
Special instructions to 1 ling Officer.	

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE FLORID

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EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 3, 2009

BARBARA DAIGLE 20 BURNING TREE LANE BOCA RATON, FL 33431

SUBJECT: A/R SOLUTIONS I, LLC

Ref. Number: W09000035133

We have received your document for A/R SOLUTIONS I, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 009A00026438

COVER LETTER

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Tallahassee, FL 32301

TO: Registration Section Division of Corporations		
SUBJECT: AR Solutions I LLC. (Name of Resulting Florida Limited Company)		
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.		
Please return all correspondence concerning this matter to:		
Barbara Daigle		
AR Solutions I LLC (Firm/Company)		
20 Burning Tree Lane AFF &		
Boca Raton, FL 33431 (City, State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (103) 606-2259 (Area Code and Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$150.00 Filing Fees (\$25 for Conversion & Status \$125 for Articles of Organization) \$180.00 Filing Fees and Certified Copy \$180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status		
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32314		

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:
A'K Solutions, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: AR Solutions I LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: $\frac{2}{1-3}$ (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 1st day of July	20 <u>09</u> .	
Signature of Member or Authorized Representa		
Signature of Member or Authorized Representative Printed Name: Larbara Daigle.	: Barbara Drigle Title: Ourser/Manager	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]		
Signature: 600 aug Dargle Printed Name: Barbara Dargle		
Printed Name: Barbara Dargle	Title: Owner/Manager	
Signature:	<i>V</i>	
Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
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Signature:	SN =	
Printed Name:	_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 **ALL** 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

ARTICLE I - Name:

The name of the Limited Liability Company is:

. : :

eviation E.E.C., of the designation
ncipal office of the Limited
Mailing Address:
4 Same
Office, & Registered Agent's 31 red Agent. You must designate and FLORID AM 11: 30 gistered agent are:
gistered agent are: Saigle 1 The lane 3 NOT acceptable) FL 33431 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

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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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Barbara Daigle 20 Burning Tree hane Boca Boton Florida 33431
	PS C
ARTICLE V: Effective date, if other than the date (The effective date: 1) cannot be prior to not document is filed by the Florida Department	(OPTIONAL) r more than 90 days after the date this of State; AND 2) must be the same as
the effective date listed in the attached Cerdate is listed therein.) REQUIRED SIGNATURE:	tificate of Conversion, if an effective
Signature of a member or an auth	Daugle orized representative of a member.
(In accordance with section 608.40 of this document constitutes an affir	8(3), Florida Statutes, the execution mation under the penalties of perjury ded herein are true.)
	d 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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