

LD9000109958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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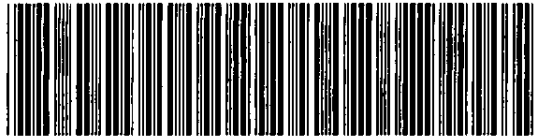
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/02/09--01031--022 **35.00

11/13/09--01004--018 **115.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 NOV 13 AM 10:42

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N. O'NEILL NOV 16 2009

LAW OFFICES OF HENRY T. SORENSEN II, P.A.

11013 Countryway Blvd. • Tampa, Fl. 33626

TEL: 813-814-7600 • FAX: 813-814-9696

November 9, 2009

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

Re: Joseph Ciarla, LLC
Reference number: P06000050736

Registration Section:

Enclosed please find the appropriate documents for Mr. Ciarla and the cover letter from Thelma Lewis dated November 4, 2009.

Ms. Lewis has confirmed receiving \$35.00 from our office and is aware we will be sending the balance of the \$150.00 filing fee via enclosed check number 2308 in the amount of \$115.00.

Please feel free to call if you have any questions at the number above.

Thank you,



Teresa Dillard
Paralegal

td

encl.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2009

JOSEPH CIARLA
JOSEPH CIARLA, P.A.
2323 SAGINSAW ROAD
NORTH PORT, FL 34286

SUBJECT: JOSEPH CIARLA, P.A.
Ref. Number: P06000050736

We have received your document for JOSEPH CIARLA, P.A. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A Florida corporation cannot change to a Florida limited liability company by filing articles of amendment pursuant to section 607.1006, Florida Statutes. Enclosed is information regarding converting to a limited liability company should this be the intention of this filing. Please note applicable fees.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 509A00034844

RECEIVED

2009 NOV 12 AM 10:00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Joseph ~~xxxx~~ Ciarla, 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:

Joseph Ciarla
(Contact Person)

Joseph Ciarla, LLC
(Firm/Company)

2323 Saginaw Road
(Address)

North Port, FL 34286
(City, State and Zip Code)

For further information concerning this matter, please call:

Joseph Ciarla at (941) 625-6200
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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

☐ \$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

MAILING ADDRESS:

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Joseph Ciarla, P.A.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a corporation

(Enter entity type. Example: corporation, limited partnership, 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 3/31/06
(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/A

4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Joseph Ciarla, LLC

(Enter Name of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the effective date: ~~11/1/09~~ 1/1/2010
(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 9th day of November 20 09.

Signature of Member or Authorized Representative of Limited Liability Company:

Signature of Member or Authorized Representative: [Signature]

Printed Name: Henry Sorensen

Title: Attorney - Authorized Rep.

Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: [Signature]

Printed Name: Joseph Ciarla

Title: President

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

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:

Joseph Ciarla, LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

2323 Saginaw Rd.
North Port, FL 34286

Mailing Address:

same as
principal office

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:

Joseph Ciarla
Name
2323 Saginaw Rd.
Florida street address (P.O. Box **NOT** acceptable)
North Port FL 34286
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)

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

Name and Address:MGRMJoseph Ciarla
2323 Saginaw Rd.
North Port, FL 34286

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 11/1/2010
(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 the effective date listed in the attached Certificate of Conversion, if an effective date is listed therein.)**REQUIRED SIGNATURE:**

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

(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.)

Henry Sorensen - Attorney
Typed or printed name of signeeSECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 NOV 13 AM 10:42

FILED

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)