## 1-0900112346

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone i	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

G. MCLEOD

NOV 23 2009

EXAMINER



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SECRETARY OF STATE OF CORPORATION

### **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT: See S	oririt, LLC (Name of Resulting	Florida Limited	(Company)	
	siness Entity" into a "			and fees are submitted to ity Company" in
Please return all corre	spondence concerning	g this matter t	to:	
DALE RHOADES	(Contact Person)			
SEE SPIRIT INC.	(Connect Foldon)			
	(Firm/Company)			
1721 RYAN DRIVE	(Address)		<del></del>	•
	City, State and Zip Code) on concerning this mat	ter, please ca		
DALE RHOADES		at ( 813	) 786-	5548
(Name of Conta	ct Person)		ode and Da	aytime 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 Fi and Certified		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS Registration Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	ions er Circle	Reg Div P. C	gistration rision of C D. Box 63	Corporations

# SECRETARY OF STATE DIVISION OF CORPORATIO

### Certificate of Conversion For "Other Business Entity"

### 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.

(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 JANUARY 20, 2004 (Enter date "Other Business Entity" was first organized, formed or incorporated	5
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:	07 4011
N/A	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	51.3
SEE SPIRIT LLC	
(Enter Name of Florida Limited Liability Company)	

Signed this day of No vembe	_20 <u>09</u>			
Signature of Member or Authorized Representative of Limited Liability Company:				
Signature of Member or Authorized Representative Printed Name: DALE RHOADES				
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]				
Signature:				
Printed Name: DALE RHOADES	Title: MGR			
Signature: Bushiel				
Printed Name: BRENDA BRINN	Title: MGRM			
Signature:				
Printed Name:				
C: anothers				
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title			
Trinica Name.				
If Florida Corporation:	Dec			
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.				
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: 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: The name of the Limited Liability Comp	any is:
SEE SPIRIT LLC	<b></b>
(Must end with the words "Limited Liability Company "LLC.")	," the abbreviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address o Liability Company is:	f the principal office of the Limited
Principal Office Address:	Mailing Address:
1721 RYAN DRIVE	1721 RYAN DRIVE
LUTZ, FL 33549	LUTZ, FL 33549
ARTICLE III - Registered Agent, Reg Signature: (The Limited Liability Company cannot serve as its or individual or another business entity with an active Florida registration.)	
The name and the Florida street address	of the registered agent are:
DALE RHOADES	
4704 DVAN DDWC	Name
1721 RYAN DRIVE Florida street addres	s (P.O. Box <u>NOT</u> acceptable)
· LUTZ	FL 33549
Ci	ry, 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..

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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:
DALE RHOADES	MGR 1721 RYAN DRIVE LUTZ. FL 33549
BRENDA BRINN	MGRM 1721 RYAN DRIVE LUTZ, FL 33549
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the of The effective date: 1) cannot be prior to not document is filed by the Florida Department the effective date listed in the attached Celate is listed therein.)  REQUIRED SIGNATURE:	(OPTIONAL) or more than 90 days after the date this at of State; AND 2) must be the same as
- Jak Sk	~
Signature of a member or an aut	horized representative of a member.
of this document constitutes an affi	08(3), Florida Statutes, the execution irmation under the penalties of perjury ted herein are true.)
DALE RHOADES	
Typed or print	ed 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)