# L09000115127

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	iy/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	· · ·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		1

Office Use Only



000163126700

- **000163126700** 12/02/09--01020--019 \*\*150.00

09 DEC - 2 PH 12: 55
SECRETARY OF STATE

J. BRYAN

DEC -3 2009

EXAMINER

# COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Stever		LLC Florida Limited Compar	ny)
The enclosed Certification convert an "Other Business accordance with s. 60"	siness Entity" into a "		n, and fees are submitted to pility Company" in
Please return all corre	spondence concerning	g this matter to:	
David R. Stevens	(Contact Person)		991 SEC
Stevens & Associates, L	LC.		)REC
· · · · · · · · · · · · · · · · · · ·	(Firm/Company)		AS - S
8380 Glenfinnan Circle			09 DEC -2 PM 12: 55 SECRETARY OF STATE ALLAHASSEE. FLORID
	(Address)		FES.
Fort Myers, FL 33912			ORIE ORIE
(C	ity, State and Zip Code)		D
For further informatio	on concerning this mat	tter, please call:	
Davis R. Stevens		at ( 239 ) 67	1-9210
(Name of Contac	et Person)	(Area Code and	Daytime 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 Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	:	MAILING	ADDRESS:
Registration Section		Registration	
Division of Corporations Division			Corporations
Clifton Building		P. O. Box 6	
2661 Executive Cente Tallahassee, FL 3230		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.

Certificate of Conversion is: Stevens & Associates, Inc. #J34929	*
(Enter Name of Other Business Entity)	OS DEC
2. The "Other Business Entity" is a corporation	岛品
(Enter entity type. Example: corporation, limited partnership,	哥?
general partnership, common law or business trust, etc.)	TARY CASSEF
first organized, formed or incorporated under the laws of Florida	707
(Enter state, or if a non-U.S. entity, the name of the country)	STAT
on September 16, 1986	Su.
(Enter date "Other Business Entity" was first organized, formed or incorpo	rated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or coun under the laws of which it is now organized, formed or incorporated:	<u> </u>
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	Į
Stevens & Associates, LLC	•
(Enter Name of Florida Limited Liability Company)	
5. If not effective on the date of filing, enter the effective date: January 1, 2010	·
(The effective date: 1) cannot be prior to nor more than 90 days after the date document is filed by the Florida Department of State; <u>AND</u> 2) must be the san effective date listed in the attached Articles of Organization, if an effective dat listed therein.)	ne as the

Cionad th	is 24th day of November	20.09	
Signed in	is zem day of November		
·		ntative of Limited Liability Company:	
Signature Printed Na	of Member or Authorized Representati ame: <u>David R. Stevens</u>	Title: President	
		[See below for required signature(s).]	
Signature:	ame: David R. Stevens	Title: President	_
	,		-
Signature	:ame:	Trid	_
Printed Na	ame:	Title:	-
Signature	ame:	ALSE	_09
Printed Na	ame:	Title:	员工
Signature	:	AAS	ララ
Printed Na	ame:	Title:	m e k
Signature			FILEU DEC-2 PH 12: 55
Printed Na	ame:	Title:	E 5
Ciamatum.			5m 5
Printed Na	ame:	Title:	-
Signature	Corporation: of Chairman, Vice Chairman, Director, o rs or Officers have not been selected, an I	or Officer.	
	General Partnership or Limited Liabi of one General Partner.	ility Partnership:	
	Limited Partnership or Limited Liabi s of <u>ALL</u> General Partners.	lity Limited Partnership:	
All others Signature	s: of an authorized person.		
Fees:			
Fe Ce	ertificate of Conversion: less for Florida Articles of Organization: ertified Copy: ertificate 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 Company i	s:				
Stevens & Associates, LLC		-	1		
(Must end with the words "Limited Liability Company," the "LLC.")	abbreviation "L.L,C.," or the des	ignation			
ARTICLE II - Address:					
The mailing address and street address of the	principal office of the Li	mited			
Liability Company is:					
Principal Office Address:	Mailing Address:				
8380 Glenfinnan Circle	8380 Glenfinnan Circle	)			
Fort Myers, FL 33912	Fort Myers, FL 33912				
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Regindividual or another business entity with an active Florida registration.)		Ü	's 09		
The name and the Florida street address of the	registered agent are:	CRETA LAHAS	- 330°		
David R. Stevens		_SSA_	Ż		. •
Nar	ne	0	PM	П	è
8380 Glentinnan Circle		- ;			
Florida street address (P.C	) Box NOT acceptable)	ÖΞ	1,5		
	o. Dok <u>1101</u> deceptable)	25	S		:
Fort Myers	FL 33912	TATE	55		7

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:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Membe	er
MGRM	David R, Stevens
	8380 Glenfinnan Circle
	Fort Myers, FL 33912
MGR	Janice A. Stevens
	8380 Glenfinnan Circle
	Fort Myers, FL 33912
	ລິທ <b>ິ</b>
	201
	SSR 2
	mo g M
	(Use attachment if necessary) SE un
	(Ose attachment it necessary)
TICLE V: Effective date, if other t	han the date of filing: January 1, 2010
	(OPTIONAL)
e effective date: 1) cannot be pri	ior to nor more than 90 days after the date this
	partment of State; AND 2) must be the same as
	ched Certificate of Conversion, if an effective
ate is listed therein.)	
,	
<b>REQUIRED SIGNATURE:</b>	
	9
( Nound &	tunio
Signature of a member or	an authorized representative of a member.
,	<u> </u>
	on 608.408(3), Florida Statutes, the execution
	s an affirmation under the penalties of perjury
that the i	facts stated herein are true.)
David_R. Stevens	
Typed	or printed name of signee
~ -	<del>-</del>

#### **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)