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

Office Use Only



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2010 JAN 19 AM II: US SECRETARY OF STATE TATLANASSEE, FLORIDA

OF STATE

JAN 2 0 2010
EXAMINER

COVER LETTER

	ration Section on of Corpora			
SUBJECT:		Consulting Gi	roup, LLC Florida Limited Company)	
	ther Business	Entity" into a "	ticles of Organization, Florida Limited Liabil	and fees are submitted to ity Company" in
Please return	all correspon	dence concerning	g this matter to:	
Terri L Castro			· 	
.4	(Co	ntact Person)		•
Precision Cons	ulting Group, L	.LC		
	(Fin	n/Company)		
2 North Pine C	rcle			
		(Address)		
		-		
Belleair, Florid				
	(City, St	ate and Zip Code)		in the
For further in	ormation cor	acerning this mat	tter, please call:	SSEE. T
Terri L Castro			at (727) 580-	4230
(Name of Contact Person)			ytime Telephone Number)	
Enclosed is a	check for the	following amou	nt:	
\$150.00 Filin (\$25 for Convers & \$125 for Artic of Organization)	ion and C	55.00 Filing Fees Certificate of	\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET AD	DRESS:		MAILING A	ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Registration Section Division of Corporations P. O. Box 6327 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: Precision Consulting Group, Inc. POG-20590
(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)
00/44/2006
on 02/14/2006
(Enter date Other business Entity was first organized, for med or meor porate)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country on under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Precision Consulting Group, LLC
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: (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			
Signature of Member or Authorized Representa	ative of Limited Liability Con	npany:	
Signature of Member or Authorized Representativ Printed Name: <u>Terri L Castro</u>	e: LUVY A (AX) Title: MGRM	tro	
Signature(s) on behalf of Other Business Entity:	[See below for required signate	ure(s).]	
Signature Level & Castro			
Printed Name: Terri L Castro	Title: President		
Signature:			
Printed Name:			
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:	PO P)
Signature:			5
Signature:Printed Name:	Title:	<u> </u>	1
Signature:		- See	S
Printed Name:	Title:	<u> </u>	,,,
If Florida Corporation:		= = 7	
Signature of Chairman, Vice Chairman, Director, or		Ori (
If Directors or Officers have not been selected, an In	corporator must sign.		
If Florida General Partnership or Limited Liabili	ty Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:		
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:

Precision Consulting Ground (Must end with the words "Limited Liability Co"LLC.")	• •
ARTICLE II - Address: The mailing address and street addr Liability Company is:	ess of the principal office of the Limited
Principal Office Address:	Mailing Address:
2 North Pine Circle	2 North Pine Circle
Belleair, Florida 33756	Belleair, Florida 33756
individual or another business entity with an active Florida registrat The name and the Florida street add Teri L Castro	32 =
2 N Pine Circle	dress (P.O. Box NOT acceptable)
Belleair	FL 33756 City, State, and Zip
above stated limited liability compo hereby accept the appointment of capacity. I further agree to comply the proper and complete performa accept the obligations of my pos	agent and to accept service of process for the my at the place designated in this certificate, I as registered agent and agree to act in this with the provisions of all statutes relating to nce of my duties, and I am familiar with and tion as registered agent as provided for in other 608, F.S

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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	Terri L Castro 2 N Pine Circle Belleair, Florida 33756
	(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 Departmenthe effective date listed in the attached Ce date is listed therein.)	(OPTIONAL) = consistency or more than 90 days after the date this tof State; AND 2) must be the same as
REQUIRED SIGNATURE: Signature of a member or an auth	norized representative of a member.
of this document constitutes an affi	08(3), Florida Statutes, the execution rmation under the penalties of perjury ed herein are true.)
Terri L Castro Typed or printe	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)