L10000025582

(Requestor's Name)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Casanoos 2.11.),ae,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

MAR - 8 2009

EXAMINER

710A-5676

COVER LETTER

TO: Registration S	Section			
Division of C	orporations			
SUBJECT: BARLOV	W'S TRI COUNTY SCREI	ENS LLC		
	(Name of Resulting	Florida Limited C	ompany)	
convert an "Other Buaccordance with s. 60	isiness Entity" into a "	Florida Limited	l Liabili	and fees are submitted to ity Company" in
r lease return an com	espondence concernin	g uns mauer to.		
KEVIN S BARLOW JR				
	(Contact Person)	·	_	SEC 3
BARLOW'S TRI COUN	TY SCREENS LLC			PAC A
	(Firm/Company)			PS-27
14514 SE 100TH AVE				THE ST
	(Address)			707
SUMMERFIELD FL, 34	1491			OR CO
((City, State and Zip Code)			-
SKEETER55@COMCA	ST.NET	_		
E-mail Address: (to b	e used for future annual re	port notifications)	_	
For further informati	on concerning this ma	tter, please call:		
KEVIN S BARLOW JR		at (352) 288-1	242 OR 352 266-0404
(Name of Conta	ict Person)		le and Da	ytime Telephone Number)
Enclosed is a check f	for the following amou	int:		
☑ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Co		□\$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

Certificate of Conversion

For

"Other Business Entity"

Into

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.

1. The name of the "Other Business Entity" immediately prior to the filing of this
Certificate of Conversion is: BARLOW'S TRI COUNTY SCREEN INC # \$\text{P100000 11634}\$.
(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 FEB 4TH 2010
(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:
FLORIDA
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BARLOW'S TRI COUNTY SCREENS 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; <u>AND</u> 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 2ND day of MARCH	20
Signature of Member or Authorized Representa	ative of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: KEVIN S BARLOW JR	E: Lum Baulon Jr. Title: OWNER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).
Signature: Low Barlow Jr. Printed Name: KEVIN S BARLOW JR	· · · · · · · · · · · · · · · · · · ·
Printed Name: KEVIN S BARLOW JR	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 If Directors or Officers have not been selected, an Inc.	
,	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
•	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
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 1 - Name:

The name of the Limited Liability Company is:

BARLOW'S TRI COUNTY SCREENS 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:Mailing Address:KEVIN S BARLOW JRKEVIN S BARLOW JR14514 SE 100TH AVE14514 SE 100TH AVESUMMERFIELD FL, 34491SUMMERFIELD FL, 34491

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:			SEC	5	
	KEVIN S BARLOW JR		AE1	HAR	
		Name	AR	-5	
	14514 SE 100TH A	VE	_ḿ≺	-77	
	Florida street add	dress (P.O. Box NOT acceptable)		<u> </u>	,
		· · · · · · · · · · · · · · · · · · ·		ယှ	ب
	SUMMERFIELD	FL 34491	_ 홀즐	26	
		City, State, and Zip	900	J .	

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 (RÉQUIRED)

(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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MANAGER KEVIN S BARLOW JR 14514 SE 100TH AVE SUMMERFIELD FL, 34491 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (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.) KEVIN S BARLOW JR Typed or printed 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)

Page 2 of 2