# 100000080606

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



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TELA JUL 30 PM 1: 38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

AUG - 2 2010

**EXAMINER** 

#### **COVER LETTER**

**Division of Corporations** SUBJECT: Fornest Harris Plumbing Sewer and Prain Eleanning Fre (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

Please return all correspondence concerning this matter to:

| FORRES   | + CIBY H   | MRRIS                                     |  |          |    |
|--|--|---|--|----------|----|
|  | (Contact Person)   |   |  |          |    |
| Forest Harri   | S Plumbing > (Firm/Company)  | enerand DR                                | ain eleannin   | 9 FNG    |    |
| 1/961  | <u>CR. 680</u> (Address)   |   | L AH   | 1 JUL 30 | *  |
| Webste   |  | 3597                                      | ASSEE  | - 1      |    |
| FORREST &  | City, State and Zip Code)  HRKS R Fn  be used for future annual re | baka com                                  | FLOR   | PH 1:3   | 10 |
|  | on concerning this ma  | •   | 10A  | ന് ത്    |    |
| FORREST<br>MeIISS  | HAPPIS   | _at ( <u>352</u> )_5<br>(Area Code and Da | 769-0698<br>aytime Telephone Number)                                   |          |    |
|  | M Harris For the following amou                                    | int:                                      |  |          |    |
| □ \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | □\$155.00 Filing Fees and Certificate of Status                    | □\$180.00 Filing Fees and Certified Copy  | ☐\$185.00 Filing Fees,<br>Certified Copy, and<br>Certificate of Status |          |    |
| STREET ADDRES  | S:   | MAILING A                                 | ADDRESS:   |          |    |

TO:

**Registration Section** 

accordance with s. 608.439, F.S.

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 <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 for a full of Certificate of Conversion is:  FORREST HARRIS Plumbing Sewer and Drain dleanning free (Enter Name of Other Business Entity)   |
|--|
| 2. The "Other Business Entity" is a <u>Corporation</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)  first organized, formed or incorporated under the laws of <u>Florida</u> (Enter state, or if a non-U.S. entity, the name of the country)                                 |
| on 2/3/2004 (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:   |
| 4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  |
| FORREST, HARRIS Plumbing Sewer AND RAIN. Cleanning 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 day of   |  |                              |
|--|--|------------------------------|
| Signature of Member or Authorized Representation   | ative of Limited Liability Com                                 | pan <u>y:</u>                |
| Signature of Member or Authorized Representativ<br>Printed Name: Fornest C. Harris                           | e: Forut & Harris  | <u>_</u>                     |
| Signature(s) on behalf of Other Business Entity:   | See below for required signatur                                | re(s).]                      |
| Signature of Member or Authorized Representation Printed Name: Forrest C. HBRRIS                             | ve: Forut e Haves  |                              |
| Signature:   | -  |                              |
| Signature:Printed Name:  | Title:   |                              |
|  |  |                              |
| Signature:Printed Name:  | Title:   |                              |
| Signature  |  | SI                           |
| Signature:Printed Name:  | Title:   |                              |
| Printed Name:  Signature:  Printed Name:  Signature:   |  | CKETAR)                      |
| Printed Name:  | Title:   | 30<br>SSE<br>SSE             |
|  |  | TO P                         |
| Signature:   | Tr'1   |                              |
| Printed Name:  | I itle:  | - 32<br>- 32<br>- 32<br>- 32 |
| If Florida Corporation:  |  | Þ                            |
| Signature of Chairman, Vice Chairman, Director, or   |  |                              |
| If Directors or Officers have not been selected, an In-  | corporator must sign.  |                              |
| If Florida General Partnership or Limited Liabili<br>Signature of one General Partner.                       | ty Partnership:  |                              |
| If Florida Limited Partnership or Limited Liability Signatures of ALL 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<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) |                              |

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

| Forkest Harris Plumbing Se (Must end with the words "Limited Liability Company," the a "LLC.")  | were and Drain clea<br>bbreviation "L.L.C.," or the design | gnation                     | L.L.    | C.                |
|---|--|-----------------------------|---------|-------------------|
| ARTICLE II - Address: The mailing address and street address of the p Liability Company is:   | orincipal office of the Lin                                | nited                       |         |                   |
| Principal Office Address:   | Mailing Address:   |                             |         |                   |
| 4961CR680 Webster Fl.<br>33597  | 11961 CR 680   | W C 6 57                    | ter F1. | 33597             |
| ARTICLE III - Registered Agent, Registere<br>Signature:   | ed Office, & Registered                                    | Agent's                     |         |                   |
| (The Limited Liability Company cannot serve as its own Regi<br>individual or another<br>business entity with an active Florida registration.) | stered Agent. You must designate                           | SEC<br>TALL                 | 無       | •                 |
| The name and the Florida street address of the  | -  | RETA:                       | JUL 30  | TO SECURE         |
| Forrest C. Nam<br>11961CR680<br>Florida street address (P.O   | he D. Box NOT acceptable)                                  | RY OF STATE<br>SEE, FLORID, | PH ::   | Services Services |
| ·   | <del></del>  | Du.                         | ယ္      |                   |

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..

City, State, and Zip

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:  |
|---|--|
| MGRM.   | FORREST CHARRIS<br>11961ER 680<br>Webster FL. 33597  |
|   |  |
|   |  |
|   | (Use attachment if necessary)  |
| ARTICLE V: Effective date, if other than the (The effective date: 1) cannot be prior to no document is filed by the Florida Department the effective date listed in the attached Codate is listed therein.) | OPTIONAL) (OPTIONAL) ( |
| REQUIRED SIGNATURE:   | ,  |
| Fortest c 2<br>Signature of a member or an aut  | horized representative of a member.  |
| of this document constitutes an affi  | 08(3), Florida Statutes, the execution armation under the penalties of perjury ted herein are true.)   |
| Forrest CIBY H Typed or print   | MRKIS<br>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)

Page 2 of 2