L110000022815

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
LW11-8	739	





600193912536

02/11/11--01032--028 **150.00



D. BRUCE

FEB 23 2011

EXAMINER



February 14, 2011

ALISTAR POWELL 1504 BAY ROAD, #2712 MIAMI BEACH, FL 33139

SUBJECT: A W POWELL LLC Ref. Number: W11000008739

We have received your document for A W POWELL LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 911A000037682

www.sunbiz.org

COVER LETTER

Registration Section

	Division of Corporations		
	SUBJECT: A W POWELL LLC (Name of Resulting Florid	da Limited Company)	
	The enclosed Certificate of Conversion, Articles of Org "Other Business Entity" into a "Florida Limited Liabili		
	Please return all correspondence concerning this matter	to:	
	ALISTAIR POWELL (Contact Person)		
	AW POWELL LLC (Firm/Company)		
	1504 BAY RD #2712 (Address)		
	MIAM1 BEACH FL 33139 (City, State and Zip Code)		
	E-mail address: (to be used for future annual report notifications)		
	For further information concerning this matter, please of	call:	
	AUSTAIR POWEU at (30 (Area	S 815-0880 Code and Daytime Telephone Number)	
	Enclosed is a check for the following amount:		
Ķ	\$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 Certificate of		П
	Registration Section Registration of Corporations Di Clifton Building P.	AILING ADDRESS: egistration Section evision of Corporations O. Box 6327 ellahassee, 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: A W POWELL, INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>COPDO ation P100005408</u> 3 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of FL (Enter state, or if a non-U.S. entity, the name of the country)
on 6/29/10 (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:
UNITED STATES
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: A W POWELL 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 the focument 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.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this day ofOCTOB	SER 20 10
Individual signing affirms that the facts sta constitutes a third degree felony as provide	
Signature of Member or Authorized Represe Printed Name: <u>AUSTAIR</u> W POW	entative: OWNER / CHAIRMAN
this document are true. Any false informati s.817.155, F.S. [See below for required signs	
Signature: ALISTAIR W POWE	CHAIRMAN
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected	l, an Incorporator must sign.
If Florida General Partnership or Limited Signature of one General Partner.	
If Florida Limited Partnership or Limited 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) Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

w - / ≰	
ARTICLE I - Name: The name of the Limited Liability Company is:	
(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:	
1504 BAY RD #2712 MIAMI BEACH, FL, 33139 MIAMI BEACH, FL, 33139	
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:	
Shows Agents In CHANK BLEICE 1201 Hays St	ηy
Contentille Rd 1776 N PINE ISLAND RD # 118 Tallahass Florida street address (P.O. Box NOT acceptable) FL 32 PLANTATION, FL 333322	
City, State, and Zip Having been named as registered agent and to accept service of process for the above stated limited liability	

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

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managin	ng Member	
MGR	ALISTAIR POWELL 1504 BAY RD # 2712 MIAMI BEACH, FL, 33139	
The effective date: 1) cani ne Florida Department of	(OPTIONAL) not be prior to nor more than 90 days after the date this document is filed of State; AND 2) must be the same as the effective date listed in the attac	
Certificate of Conversion,	if an effective date listed therein.)	
REQUIRED SIGNATUR	RE:	
N.		
Signature of a	member or an authorized representative of a member.	
(In accordance with section the penalties of perjury the	on 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation u hat the facts stated herein are true. I am aware that any false information submitted in a ment of State constitutes a third degree felony as provided for in s.817.155, F.S.)	nder
(In accordance with section the penalties of perjury the document to the Departm	on 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation u hat the facts stated herein are true. I am aware that any false information submitted in a	nder

Date of this notice: 07-02-2010

Employer Identification Number:

27-2970397

Form: SS-4

Number of this notice: CP 575 G

A W POWELL ALISTAIR W POWELL SOLE MBR 1504 BAY RD APT 2712 MIAMI BEACH, FL 33139

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 27-2970397. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub. Thank you for your cooperation.