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| (Requestor's Name) |
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| (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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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

MAR 25 2011

EXAMINER

COVER LETTER

| 10: | Division of | n Section f Corporations | | | |
|------------------------|---|---|---|---|--|
| SUBJ | ECT: | Miller K | Resources, of Resulting Florida Limite | LLC. | |
| 5020 | | (Name o | of Resulting Florida Limite | ed Company) | |
| | | ificate of Conversion, | Articles of Organizati | on, and fees are submitt pany" in accordance wi | |
| Please | return all co | orrespondence concerr | ning this matter to: | | |
| | Geo | (Contact Person) r Resource (Firm/Company) Box 5305 (Address) (City, State and Zip Code oiller @ Code | <u>r</u> | | |
| | 11/1/1 | r Kesource | s, LLC. | | |
| | P.O. 1 | $\beta \circ \chi = 5305$ | -34 | | TILED 11 MAR 24 PH 3: 30 SECRETARY OF STATE FLORID |
| | | (Address) | | | 哲尼 |
| | DeB | ary 72 32 | 2 <i>753</i> | | SSE T |
| | · | (City, State and Zip Code | e) | | |
| | 9000 | niller @ Col | mcast.net | | LOFA W |
| E-mail | address: (to be | used for future annual rep | ort notifications) | | 95 0 |
| For fu | rther inform | ation concerning this r | natter, please call: | | • |
| | Georg | e Miller | at (_407_)_ | 227-3602 | · |
| | (Name of Co | ntact Person) | (Area Code and | d Daytime Telephone Numb | er) |
| Enclos | sed is a chec | k for the following am | ount: | | |
| , (\$25 for \$125 & | Filing Fees r Conversion for Articles nization) | \$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 | |
| STRE | ET ADDRI | ESS: | MAILIN | G ADDRESS: | |
| Regist | ration Section | on | Registration | on Section | |
| | on of Corpor | rations | | of Corporations | |
| Cliftor | n Building | | P. O. Box | 0327 | |

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

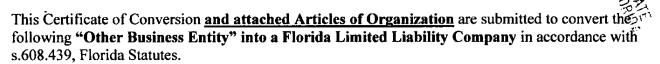
Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company



| | Other Business Entity" immediately prior to the filing of this Certificate of | |
|---|---|---|
| Conversion is: | Miller ReSources, /nc. # \rho30000 87030 (Enter Name of Other Business Entity) | |
| • | (Enter Name of Other Business Entity) | |
| 2. The "Other Busine (I | ess Entity" is a | |
| first organized, forme | ed or incorporated under the laws of Florida | |
| mot organized, romm | (Enter state, or if a non-U.S. entity, the name of the country) | |
| on Augus | t 7, 2003 | |
| (Enter date | e "Other Business Entity" was first organized, formed or incorporated) | |
| _ | of the "Other Business Entity" was changed, the state or country under the laws of sized, formed or incorporated: | |
| 4. The name of the F Organization: | Plorida Limited Liability Company as set forth in the attached Articles of Miller Resources, LLC. | |
| | (Enter Name of Florida Limited Liability Company) | |
| (The effective date: filed by the Florida | the date of filing, enter the effective date: 1) cannot be prior to nor more than 90 days after the date this document is Department of State; AND 2) must be the same as the effective date listed in th Organization, if an effective date is listed therein.) | e |
| 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 19th day of Marc | :L 20 // | |
|--|--|---------------------------------|
| | | |
| Signature of Member or Authorized Rep Individual signing affirms that the facts sta constitutes a third degree felony as provide | ited in this document are true. Any false intended for in a \$17,155, E.S. | formation |
| Signature of Member or Authorized Representation Name: George A. Miller | entative: Title: President | |
| Signature(s) on behalf of Other Business Enthis document are true. Any false informat s.817.155, F.S. [See below for required signs | ntity: Individual(s) signing affirm(s) that the ion constitutes a third degree felony as pro- lature(s).] | ne facts stated in vided for in |
| Signature: we Miller Printed Name: Learge A. Miller | , | |
| Printed Name: George A. Miller | Title: President | _ |
| Signature:Printed Name: | Title: | |
| | | 350 - |
| Signature:Printed Name: | Title: | MAR 24 |
| Signature: | | HAR 24 CRETAR |
| Signature: | Title | THE P IN |
| Timed Name. | Title. | PF S |
| Signature: | | |
| Printed Name: | Title: | |
| | | • |
| Signature:Printed Name: | Title: | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected | | |
| If Florida General Partnership or Limited Signature of one General Partner. | Liability Partnership: | |
| If Florida Limited Partnership or Limited Signatures of ALL General Partners. | Liability 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) Page 2 of 2 | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Miller Resources, 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:

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:

George A. Miller
Name

313 Plantation Club Dr. Florida street address (P.O. Box NOT acceptable)

City, State, and Zip

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..

Agent's Signature (REOUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| | r | e and Address: | |
|---|---|--|------------|
| "MGRM" = Mana | | | |
| _ | , | 1. A M. 11. | |
| Mar | • | George A. Miller 313 Plantation Club Dr. DeBany,74 32713 | |
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| | | DeBany,74 32713 | |
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