# 11000056246

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only) State/Zipir Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
, <del></del>
Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. CLINE
MAY 1 2 2011

**EXAMINER** 

### **COVER LETTER**

TO:	Registration S Division of Co					
SUBJ	ECT: C. Lindsa	•				
oc bo		(Name of Resulting	Florida Limited Co	mpany)		
conve		eate of Conversion, Ar siness Entity" into a " 8.439, F.S.	_	-		
Please	return all corre	espondence concernin	g this matter to:			
Lara K	leinheinz			_		
		(Contact Person)				
Busine	ss Filings Incorpor			_		
		(Firm/Company)				
8040 E	Excelsior Dr Suite	200		_		
		(Address)				
Madisc	on WI 53717					20 SI TAI
	(0	City, State and Zip Code)		-		
rozlowe	e2@aol.com					THE A
E-m	nail Address: (to be	e used for future annual re	port notifications)	-		RY SSE
For fu	rther information	on concerning this ma	tter, please call:			DII HAY I I AH 道: 0: SECRETARY OF STATE ALLAHASSEE, FLORID
Lara K	leinheinz		_at ( <u>608</u>	) 827-5	300 ext 225	RIDE
	(Name of Conta	ct Person)		and Da	ytime Telephon	e Number)
Enclos	sed is a check for	or the following amou	ınt:			
(\$25 for & \$125	0.00 Filing Fees r Conversion for Articles unization)	\$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	
STREET ADDRESS:		S:			DDRESS:	
Registration Section Division of Corporations			Registration Section Division of Corporations			
Clifton Building			P. O. Box 6327			
2661 Executive Center Circle		Tallahassee, FL 32314				

Tallahassee, FL 32301

### 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.

The name of the "Other Business Entity" immediately prior to the filing of this ertificate of Conversion is:  ersonal Development Institute Inc. $f(l-3)953$					
(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.)	ip,				
first organized, formed or incorporated under the laws of Florida	2011 SEQ				
(Enter state, or if a non-U.S. entity, the name of the country	2011 HAY 1 SECRETAR ALLAHASS				
on 4/19/2011 (Enter date "Other Business Entity" was first organized, formed or inc					
3. If the jurisdiction of the "Other Business Entity" was changed, the state or under the laws of which it is now organized, formed or incorporated:	condity CODA				
4. The name of the Florida Limited Liability Company as set forth in the atta Articles of Organization:	ched				
C. Lindsay Lowe Jr. LLC					
(Enter Name of Florida Limited Liability Company)	<del></del>				
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 document is filed by the Florida Department of State; AND 2) must be the effective date listed in the attached Articles of Organization, if an effective	e same as th				
listed therein					

Signed this 2ro day of MAY	_20	
Signature of Member or Authorized Representat	Λ Λ	npany:
Signature of Member or Authorized Representative Printed Name: C Lindsay Lowe Jr	Title: Member	me fr
Signature(s) on behalf of Other Business Entity: [S		ure(s).]
Signature: Printed Name: C Lindsay Lowe 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 Officers have not been selected, an Inc.	Officer.	_
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:	2011 HAY 1 SECRETAR
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:	Y OF ST
All others: Signature of an authorized person.		FLORIDA
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 OF C. Lindsay Lowe Jr. LLC

**ARTICLE I** 

NAME

The name of the limited liability company shall be: C. Lindsay Lowe Jr. LLC

**ARTICLE II** 

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1122 Anchor Ave, The Villages, Florida 32162-3399.

### ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

### ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

#### ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and address of the Members are:

C Lindsey Lowe Jr., 1122 Anchor Ave, The Villages, Florida 32162-3399 Rosalyn Lowe, 1122 Anchor Ave, The Villages, Florida 32162-3399

Business Filings Incorporated, Organizer

Mark Williams, A.V.P. Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

WI 53717 608-827-5300 Date: 4/28/2011

TARY OF STATE HASSEE, FLORIDA

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: C. Lindsay Lowe Jr. LLC

The name and address of the registered agent and office is Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Mark Williams, A.V.P., Business Filings Incorporated

Date: 4/28/2011

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