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DATE:

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NAME:

CPA911 PUBLISHING LLC

TYPE OF FILING: ARTICLES OF CONVERSION/ORAGANIZATION

COST:

\$150

EFFECTIVE DATE 10/1/2011

RETURN:

ACCOUNT: FCA00000015

AUTHORIZATION: A

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\$180,00 Filing Fees and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Articles of Organizat Limited Liability Comming this matter to: at (904) (Area Code and Certified Copy MAILIN Registrati Division of P. O. Box	Articles of Organization, and fees are submitted to convert an Limited Liability Company" in accordance with s. 608.439, F.S. ming this matter to: EFFECTIVE DATE

EFFECTIVE DATE 10 1 2011

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:	
* CPA911 Publishing, LLC	
(Enter Name of Other Business Entity)	
a of way and a rest of Limited Liability Commons	
2. The "Other Business Entity" is a Limited Liability Company	
(Enter entity type. Example: corporation, limited partnership,	
general partnership, common law or business trust, etc.)	
first organized, formed or incorporated under the laws of Pennsylvania	
(Enter state, or if a non-U.S. entity, the name of the country)	
on 10-23-2003	
(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:	
ČPA911 Publishing, LLC	
(Enter Name of Florida Limited Liability Company)	
Date: Name of Florida Dainted Datatily Company)	
5. If not effective on the date of filing, enter the effective date: October 1, 2011	
(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	1e
aftached Articles of Organization, if an effective date is listed therein.)	
q^*	
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.

723The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this 14th day of September	20 <u>11</u>
Individual signing affirms that the facts st constitutes a third degree felony as provid	
Signature of Member or Authorized Repre- Printed Name: Thomas E. Barich	sentative. Title: Manager
	Cntity: Individual(s) signing affirm(s) that the facts stated in tion constitutes a third degree felony as provided for in nature(s).
Signature:	
Printed Name: Kathy Ivens	Title: Member / Manager
Signature:Printed Name:	Title:
	
Signature:	Title:
Signature:	Title:
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Printed Name	Title:
Trintod Ivanio.	
If Florida Corporation:	0.00
Signature of Chairman, Vice Chairman, Direct If Directors or Officers have not been selected	
If Directors of Officers have not been selected	a an monton man oron.
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	<u>Liability Limited Partnership:</u>
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

Signed this 14th day of September	20 <u>11</u>		
Signature of Member or Authorized Representative of Limited Liability Company: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.			
Signature of Member or Authorized Repres Printed Name: Thomas E. Barich	entative: Title: <u>Manager</u>		
this document are true. Any false informat s.817.155, F.S. [See below for required sign	ntity: Individual(s) signing affirm(s) that the facts stated in ion constitutes a third degree felony as provided for in ature(s).		
Signature: Tar lay fuer Printed Name: Kathy Ivens	Title: Member/Manager		
	Title:		
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, Directors or Officers have not been selected	etor, or Officer.		
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:	
CPA911 Publishing, LLC (Must end with the words "Limited Liability Company, the abbre	viation "L.L.C.," or the designation "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
411 Walnut St., #3416 Green Cove Springs, FL 32043	411 Walnut St., #3416 Green Cove Springs, FL 32043
ARTICLE III - Registered Agent, Registered ((The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ad Agent. You must designate an individual or another
The name and the Florida street address of the reg	istered agent are:
Thomas E. Barich	
	Vame

Green Cove Springs FL 32043

City, State, and Zip

Florida street address (P.O. Box NOT acceptable)

411 Walnut St., #3416

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

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:
MGR	Thomas E. Barich 411 Walnut St., #3416 Green Cove Springs, FL 32043
(Use attachment if necessary) ARTICLE V: Effective date, if other	than the date of filing: October 1, 2011.
	or to nor more than 90 days after the date this document is filed by ND 2) must be the same as the effective date listed in the attached
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member.
the penalties of perjury that the facts s), Florida Statutes, the execution of this document constitutes an affirmation under tated herein are true. I am aware that any false information submitted in a constitutes a third degree felony as provided for in s.817.155, F.S.)

Thomas E. Barich
Typed or printed name of signee