

L13000123411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

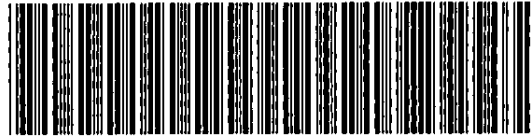
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600250514206

08/30/13--01014--012 **185.00

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2013 AUG 30 AM 11:11
NOT RECORDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
2013 AUG 30 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-23

CONTACT: KATIE WONSCH

DATE: 08/30/2013

REF. #:

CORP. NAME: DOCULEX, INC. into DOCULEX, LLC

FILED
2013 AUG 30 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input checked="" type="checkbox"/> OTHER: CONVERSION | | |

STATE FEES PREPAID WITH CHECK# 10000534 FOR \$ 185.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input checked="" type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

CERTIFICATE OF CONVERSION
FOR
"OTHER BUSINESS ENTITY"
INTO
FLORIDA LIMITED LIABILITY COMPANY

FILED
2013 AUG 30 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 Section 608.439, Florida Statutes.

The name of the Other Business Entity immediately prior to the filing of this Certificate of Conversion is **Doculex, Inc.** (Florida Document Number P96000029428). The Other Business Entity was incorporated under the laws of the State of Florida on March 29, 1996.

The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization is **Doculex, LLC**.

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 Section 608.439, Florida Statutes.

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

The conversion shall be effective in Florida on August 30, 2013.

[Signatures appear on next page]

Executed as of: August 30, 2013

DOCULEX, LLC

6/10 Corporation, a Florida corporation, its
member

By: 

Kerry M. Wilson, President

DOCULEX, INC.

By: 

David Bailey, President

FILED
2013 AUG 30 AM 8:50
TALLAHASSEE
SECRETARY OF STATE
FLORIDA

**ARTICLES OF ORGANIZATION
OF
DOCULEX, LLC**

2013 AUG 30 AM 8:50
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned executes these Articles of Organization of DOCULEX, LLC to form a limited liability company pursuant to the Florida Limited Liability Company Act:

ARTICLE I. NAME

The name of the limited liability company is: DOCULEX, LLC.

ARTICLE II. ADDRESS

The mailing of the principal office of the limited liability company is P.O. Box 7378, Winter Haven, Florida 33883-7378, and the street address of the principal office of the limited liability company is 199 Avenue B NW, Suite 200, Winter Haven, Florida 33881.

ARTICLE III. INITIAL REGISTERED AGENT AND OFFICE

The street address of the initial registered office of the limited liability company is 199 Avenue B NW, Suite 200, Winter Haven, Florida 33881, and the name of the limited liability company's initial registered agent at that address is Carl J. Strang, III.

Having been named 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.



Carl J. Strang, III

ARTICLE IV. MANAGEMENT OF COMPANY

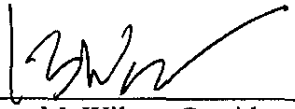
The limited liability company is a manager-managed limited liability company.

ARTICLE V. EFFECTIVE DATE

The effective date of these Articles of Organization is August 30, 2013.

EXECUTED: August 30, 2013

6/10 CORPORATION,
a Florida corporation, its member

By: 
Kerry M. Wilson, President

FILED
2013 AUG 30 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA