L14000057625

(Requestor's Name)
• •
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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LEMERS APR 0 9 2014



March 14, 2014

ALAN CAMPBELL 12135 BUFFINGTON LANE RIVERVIEW, FL 33579

SUBJECT: ARC TERMITE AND PEST CONTROL LLC

Ref. Number: W14000016615

We have received your document for ARC TERMITE AND PEST CONTROL LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not allow a sole proprietorship to file a conversion. A sole proprietorship is a business owned and operated by one individual. As a sole proprietor, the one individual owner is responsible for making all of the business decisions and all of the debts of the business are considered to be the debts of the one individual owner, as well. The sole proprietorship may or may not conduct business under the one individual owner s legal name. Because the business and the individual are considered as one organization and need each other to co-exist from a legal perspective, a sole proprietorship is not considered a business entity and cannot, therefore, file a conversion under Florida law.

If your sole proprietorship is actually owned and operated by two or more individuals and those individuals serve in the capacity of a partner, your business may not be a sole proprietorship. Your business may meet the definition of a partnership in accordance with Chapter 620, Florida Statutes. Chapter 620, Florida Statutes, allows a partnership to file a conversion. However, the partnership must first file a statement of registration in accordance with section 620.8105, Florida Statutes.

We are enclosing a statement of registration should your business entity meet the criteria of a partnership and you wish to proceed with the conversion. Please note the fee to register a partnership is \$50. To proceed with the conversion, please correct your conversion documents to reflect your current business entity is a partnership and resubmit the conversion documents along with the enclosed registration statement and an additional fee of \$50.

This office strongly suggests that you seek legal advice concerning this matter.

Please return the corrected original and one copy of 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) 245-6051.

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

Letter Number: 514A00005593

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COVER LETTER

and Tomala and Orat Arabal 111
SUBJECT: 1-KC 12mtl and 1-05t Control Luc (Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Alan R Campbell (Contact Person)
ARC Termite and Past Control (Firm/Company)
12135 Buffington Lane
RIVORVIOW FL 33579 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Norma Campball at (813) 293-4173. (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\begin{array}{c ccccccccccccccccccccccccccccccccccc
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

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	ermite and	. Pest Co	introl, LL	<u>C</u>		
(Must	end with the words "Limited	Liability Company	, "L.L.C.," or "LLC.")		
ARTICLE II - Add The mailing address	ress: and street address of t	the principal of	fice of the Limit	ed Liability Co	mpany	/ is:
Principal Office Ad	dress:	<u>Mailin</u>	g Address:			
12135 Buffir Riverview	pton lang PL 33579	lai3 Rivo	5 Buffing Niver, FC	aton Lane		
(The Limited Liability Con- business entity with an act	gistered Agent, Regis npany cannot serve as its own live Florida registration.) orida street address of	Registered Agent.	You must designate a	gent's Signatur n individual or anoth	er	
-	Norma Ca	moball Name		CRE TAR LAHASS	4 APR -7	Emma summer roachta
-	Florida street address	P.O. Box NO	T acceptable)	Y OF STA BEE, FLOR	AM ::: 18	2
-	K NONICW City	FL_	<u> </u>	TE A SIDA	8	

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	Company:							
	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	Name and Address:					
	"MGR" = Manager	Alan R Campbal 12135 Buttington	1-0w	<u>-</u> 100				
	AMBR	Norma Campbell 12135 Buffireton Riverview, FC 33	Jane 579					
	(Use attachment if necessary)		€°3.					
ART)	ICLE V: Effective date, if other than the effective date is listed, the date must	e date of filing:	(GP]	IONA	L)			
to or	90 days after the date of filing.)	be specific and campot be more than	n nve pusi ≥≈	nesa a	ays prio			
ART	ICLE VI: Other provisions, if any.		IAKY IASSEE	R-7	formation of the same of the s			
			<u> </u>	3				
			- 977 - 227	=				
	REQUIRED SIGNATURE:		DA A	ග				
	N Januar (de diane						
	Signature of a member	er or an authorized representative of	f a membe	 er.				
c I	(In accordance with section 605.0203 (constitutes an affirmation under the pen am aware that any false information supports that any false information supports that a third degree felony as proven the second that are the secon	 (b), Florida Statutes, the execution alties of perjury that the facts stated he ibmitted in a document to the Departm 	of this doc erein are tr	ument ue.				
	Noma	Campball						
	Ту	ped or printed name of signee	· · · · - · - · - ·	=				

The name and address of each person authorized to manage and control the Limited Liability

Filing Fees:

ARTICLE IV-

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)