

L/4000064965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

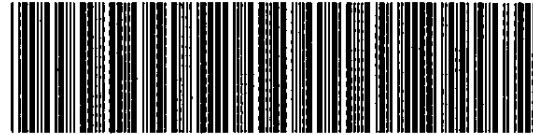
Special Instructions to Filing Officer:

APR 22 2014

A. LUN

W14-14676

Office Use Only



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03/04/14--01012--017 **150.00

CLERK OF STATE
TALLAHASSEE, FLORIDA

2014 APR 14 PM 1:28

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 6, 2014

WILLIAM C. BOYKIN
3321 SUNSET KEY CIR. UNIT 407
PUNTA GORDA, FL 33955

SUBJECT: INTEGRATED SOLUTIONS & SERVICES GROUP, LLC
Ref. Number: W14000014676

We have received your document for INTEGRATED SOLUTIONS & SERVICES GROUP, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return 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.

Agnes Lunt
Regulatory Specialist II

Letter Number: 814A00004975

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Integrated Solutions & Services Group, LLC
(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:

William C. Boykin

(Contact Person)

Integrated Solutions & Services Group, LLC

(Firm/Company)

3321 Sunset Key Circle, Unit 407

(Address)

Punta Gorda, FL 33955

(City, State and Zip Code)

bboykin@go-issg.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

William C. Boykin

at (404)

285-7288

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$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:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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2014 APR 14 PM 1:28
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
Integrated Solutions & Services Group, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Georgia LLC
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Georgia
on 6/1/2004
(date of organization, formation or incorporation)

(Enter state, or if a non-U.S. entity, the name of the country)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
Integrated Solutions & Services Group, LLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: _____
(The effective date: 1) cannot be prior to date of receipt or filed date 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 attached Articles of Organization, if an effective date is listed therein.)

5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

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DEPT. OF STATE
TALLAHASSEE, FL 32310

Signed this 28 day of February 20 14.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: WCB
 Printed Name: William C. Boykin Title: Manager

Signature(s) on behalf of Other Business Entity: (See below for required signature(s).)

Signature: WCB
 Printed Name: William C. Boykin Title: Manager

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 Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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 2014 APR 14 PM 1:28
 CLERK OF COURT
 PALM BEACH COUNTY, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Integrated Solutions & Services Group, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Integrated Solutions & Services Group, LLC

3321 Sunset Key Circle, Unit 407

Punta Gorda, FL 33955

Mailing Address:

Integrated Solutions & Services Group, LLC

3321 Sunset Key Circle, Unit 407

Punta Gorda, FL 33955

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:

William C. Boykin

Name

3321 Sunset Key Circle, Unit 407

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

Punta Gorda

FL 33955

City

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 605, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK OF CIRCUIT COURT
FLORIDA 11th JUDICIAL CIRCUIT
PUNTA GORDA, FL 33955

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

William C. Boykin

3321 Sunset Key Circle, Unit 407

Punta Gorda, FL 33955

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CLERK OF DISTRICT COURT
STATE OF FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

William C. Boykin

Typed or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)