L14000114671

		193-3182
	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instruction	s to Filing Officer:	

Office Use Only



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Bellwether Professional Park 2201 S.E. 30th Avenue, Suite 202 Ocala, Florida 34471 Telephone
(352) 622-1811
Facsimile
(352) 622-1866
Email
Tommy@Permenterlaw.com

July 18, 2014

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re:

Hall-Mark Fire Apparatus, Inc./ LLC

Certificate of Conversion Our File No.: 06-0106

Ladies and Gentlemen:

Enclosed please find the Certificate of Conversion for "Other Business Entity" into Florida Limited Liability Company for Hall-Mark Fire Apparatus, Inc., for filing.

Also, enclosed is my firm's check in the amount of \$180.00 representing the filing and certified copy fees.

Thank you for your assistance in this matter. If you have any questions, please let me know.

Sincerely,

THE PERMENTER LAW FIRM, P.A.

Tommy D. Permenter, Jr.

TDP/am Enclosures

COVER LETTER

Division of C	orporations			
SUBJECT: Hall-Ma	ark Fire Apparatus, L	LC		
50B0201.		of Resulting Florida	Limited	d Company)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
Tommy D. Permen	ter, Jr., Esq.			
	(Contact Person)		-	
The Permenter Lav	v Firm, P.A.			
	(Firm/Company)		_	
2201 S.E. 30th Ave	enue, Suite 202			
	(Address)		-	
Ocala, Florida 344	71			
((City, State and Zip Code)		-	
tommy@permente	rlaw.com			
E-mail Address: (to b	e used for future annual re	port notifications)	_	
For further information	on concerning this ma	tter, please call:		
Tommy D. Permen	ter, Jr., Esq.	_at (352	622-	1811
(Name of Conta	ect Person)) (Day	time Telephone Number)
Enclosed is a check f	for the following amou	int:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAIL	ING A	ADDRESS:
Registration Section			ration S	
Division of Corporat	ions		on of C Box 632	orporations
Clifton Building 2661 Executive Cent	er Circle			FL 32314
Tallahassee, FL 323				· ·

INHS11 (02/14)

TO: Registration Section

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

Statutes.		
1. The name of the "Other Business Ent Hall-Mark Fire Apparatus, Inc.	ity" immediately prior to the filing of the Artic	cles of Conversion is:
	ne of Other Business Entity)	- '
2. The "Other Business Entity" is a corp	poration	,
(Ente	r entity type. Example: corporation, limited partnershi eneral partnership, common law or business trust, etc.)	p,
First organized, formed or incorporated to	under the laws of Florida	
Anril 29 1993	(Enter state, or if a non-U.S. entity, the	he name of the country)
on (date of organization, formation or incorpora	ation)	
 The name of the Florida Limited Liab Hall-Mark Fire Apparatus, LLC 	oility Company as set forth in the attached Ar	ticles of Organization:
· · · · · · · · · · · · · · · · · · ·	rida Limited Liability Company)	_ ·
4. If not effective on the date of filing, e	· · · · · · · · · · · · · · · · · · ·	<u></u> .
date this document is filed by the Flori	to date of receipt or filed date nor more th ida Department of State; <u>AND</u> 2) must be tl Organization, if an effective date is listed the	he same as the effective
5. The plan of conversion has been appro	oved in accordance with ss. 605.1041-605.104	6.
		₹÷
	Page 1 of 2	14 JUL 21
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		The second secon

, Ma	
Signed this day of July	20 <u>14</u> .
Signature of Authorized Representative of Lim	ited)Liability Company:
Signature of Authorized Representative: Printed Name: James W. Hall	
Printed Name: James W. Hall	l Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
-()Y	-
Signature:	
Printed Name: James W. Hall	Title: President
Signature:Printed Name:	m· i
Printed Name:	1 itle:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	 _
Printed Name:	Title:
Cionatura	
Signature:Printed Name:	Title:
Timica Name.	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili	ity Partnership:
Signature of one General Partner.	
TOTAL SIL TRANSPORTED AND ADMINISTRATION OF SIX	4 T. C. C. A. B. C. C. C. A. C.
If Florida Limited Partnership or Limited Liabili	
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	<u>'</u>
	:
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Hall-Mark Fire Apparatus, LLC (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3431 N.W. 27th Avenue	3431 N.W. 27th Avenue
Ocala, Florida 34475	Ocala, Florida 34475
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	
James W. Hall	<u> </u>
Name	
7851 N.W. 56th Place	
Florida street address (P.O.	Box NOT acceptable)
Ocala	FL 34482
City	Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S
	otime (REQUIRED)
Registered Agent's Sign	ature (REQUIRED)
	<u></u>
(CONTINI	
Page 1 of	2 m
1460101	2

The name and address of each perso Company:	n authorized to manage and control the Limited Liability	
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	James W. Hall	
WOIL	7851 N.W. 56th Place	
	Ocala, Florida 34482	
MGR	William D. Alm	
	4994 S.W. 1st Avenue	
	Ocala, Florida 34471	
		
(Use attachment if necessary) ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.)	te date of filing: (OPTIONAL) t be specific and cannot be more than five business days pr	ior
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:		
(In accordance with section 605.0203 (constitutes an affirmation under the per	er of an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true, ubmitted in a document to the Department of State yided for in s.817.155, F.S.)	
James W. Hall	⇔	
	/ped 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)