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Office Use Only



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EFFECTIVE DATE 10/1/14

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### **COVER LETTER**

TO:	Registration S Division of C			
SUBJ	ECT: Frontlin	e Inspection Service	e LLC	
	<del></del> -		of Resulting Florida Limi	ted Company)
				nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	return all corre	espondence concernin	g this matter to:	
Willia	m A. Burgess	; -		
		(Contact Person)		
Front	line Inspection	n Service LLC		
		(Firm/Company)	<del></del>	
6626	Founders Str	eet		
_		(Address)		
Zeph	yrhills Florida	33542		
	((	City, State and Zip Code)		
Front	line.insp.servi	ce@hotmail.com		
E-m	ail Address: (to b	e used for future annual re	port notifications)	
For fu	ther information	on concerning this ma	tter, please call:	
Willia	m A. Burgess		at (813 )713	3-6064
_	(Name of Conta	ct Person)	_ \	ytime Telephone Number)
Enclos	ed is a check for	or the following amou	nt:	
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	□\$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
Registr Division Clifton 2661 E	ET ADDRESS ration Section on of Corporation Building Executive Centers See, FL 3230	ons er Circle	Registration	Corporations 327



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2014

WILLIAM A. BURGESS 6626 FOUNDERS STREET ZEPHYRHILLS, FL 33542

SUBJECT: FRONTLINE INSPECTION SERVICE LLC.

Ref. Number: W14000055100

We have received your document for FRONTLINE INSPECTION SERVICE 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):

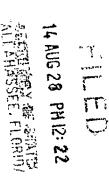
The Certificate of Conversion must be signed by an authorized person.

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.

Elliott R McCaskill Registration Specialist II

Letter Number: 614A00019263



# **Articles of Conversion**

For

## "Other Business Entity"

Into

## Florida Limited Liability Company

The Articles 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.

<ol> <li>The name of the "Other Business Entity" immediately prior to the filing of the Articles         Frontline Inspection Service INC.</li> </ol>	of Conve	rsion	15:
P14 0000 56628 (Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a Corporation			
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)			
First organized, formed or incorporated under the laws of			
On August 1, 2014 (Enter state, or if a non-U.S. entity, the n	ame of the c	ountry	)
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Articl Frontline Inspection Service LLC.	es of Org	aniza	tion:
(Enter Name of Florida Limited Liability Company)			
4. If not effective on the date of filing, enter the effective date: October 1, 2014			
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the sdate listed in the attached Articles of Organization, if an effective date is listed thereion	same as th	fter tl ie effe	he ective
5. The plan of conversion has been approved in accordance with all applicable statutes.			
Page 1 of 2	SSSVHYTTV.	14 AUG 28	Mary to the second of the seco
		H	

Signed this 25 day of AVGUST	_20 <u>_14</u>			
Signature of Authorized Representative of Limit	ted Liability Company:			
Signature of Authorized Representative: Printed Name: William A. Burgess	Title: President			
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).			
Signature: Printed Name: () WIAMA, BURCEST	Title: ChryLmAn			
Signature:				
Printed Name:	_ Title:			
Signature:Printed Name:	_ Title:			
Signature:Printed Name:				
Signature:Printed Name:				
Signature:Printed Name:	_ Title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.				
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:			
All others: Signature of an authorized person.		12 C4	14.1	<b>5</b>
Fees:		全部	AUG 28	tanan tanan tanan
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	SEE, FLORID	8 PH 12: 22	「「

Page 2 of 2

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
The name of the Difficulty Company is.		
Frontline Inspection Service LLC.		
(Must end with the words "Limited Liabil	ity Company, "L.L.C" or "LLC.")	<del></del>
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Li	iability Company is:
Principal Office Address:	Mailing Address:	
6626 Founders Street	6626 Founders Street	
Zephyrhills Florida 33542	Zephyrhills Florida 33542	
The name and the Florida street address of the r  William A. Burgess  Name  6626 Founders Street  Florida street address (P.O.	,	
Zephyrhills	FL 33542	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and complete paccept the obligations of my position as reg	this certificate, I hereby accept ity. I further agree to comply wi performance of my duties, and I	the appointment as ith the provisions of all am familiar with and
Registered Agent's Sign	ature (REQUIRED)	
(CONTIN	·	AUG 28
Page 1 of	<b>2</b>	

EFFECTIVE DATE (0/1/4

"AMBR" = Manager MGR  William A. Burgess 6626 Founders Street Zephyrhills Florida 33542  (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing: October 1, 2014 (OPTIONAL effective date is listed, the date must be specific and cannot be more than five business date of days after the date of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member. In accordance with section 605.0208 (1) (b), Florida Statutes, the execution of this document institutes an affirmation under the penalties of berlury that the facts stated herein are true. In aware that any false information submitted in a document to the Department of State and State and State and State and State are stated herein are true. Typed or printed name of signed Particular State and State are stated herein are true. Typed or printed name of signed Particular State and State are stated herein are true. Typed or printed name of signed Particular State and State are stated herein are true. Typed or printed name of signed Particular State and State are stated herein are true. Typed or printed name of signed Particular State and State are stated herein are true. Typed or printed name of signed Particular State and State are stated herein are true. Typed or printed name of signed Particular State and State are stated herein are true. Typed or printed name of signed Particular State and St	Title:	Name and Address:
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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)	effective date is listed, the do days after the date of filing the date of the date	ate must be specific and cannot be more than five business deg.)  any.  E:  a member or an authorized representative of a member.  05.0208 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.  mation submitted in a document to the Department of State  y as provided for in s.817.155, F.S.)
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5 30.00 Certified Copy (Optional)	REQUIRED SIGNATUR  Signature of n accordance with section of nstitutes an affirmation under maware that any false infornstitutes a third degree felon William A. I	a member or an authorized representative of a member.  35.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)  Burgess  Typed or printed name of signee
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ARTICLE IV-