

L15000004829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

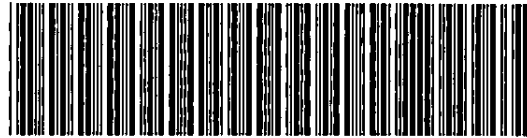
Special Instructions to Filing Officer:

Funds carried forward
from a previous online
rejected filing.

W11000014275

Office Use Only

795-94752 - Conventry and



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03/16/11--60076--018 **150.74

EFFECTIVE DATE

1/1/15

RECEIVED STATE
TALLAHASSEE, FLORIDA

14 DEC 30 AM 11:30

FILED

M. MILLIGAN
EXAMINER

JAN -9 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2014

TODD CONSTRUCTION INC.
927 SW LAKE ROESIGER RD
SNOHOMISH, WA 98290

SUBJECT: TODD CONSTRUCTION INC.
Ref. Number: P95000094752

Pursuant to our telephone conversation of August 5, 2014, I am enclosing proper forms to convert from a corporation to a limited liability company.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6051.

Michelle Milligan
Senior Section Administrator

Letter Number: 514A00016752

RECEIVED
14 DEC 30 AM 10:09
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Todo Construction LLC
(Name of Resulting Florida Limited Company)

The enclosed Articles 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:

Dennis Todd

(Contact Person)

Todo Construction LLC

(Firm/Company)

927 SW Lake Roesiger Road

(Address)

Snohomish, WA 98290

(City, State and Zip Code)

dennisgtodd@gmail.com

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

For further information concerning this matter, please call:

Dennis Todd

(Name of Contact Person)

at (360) 722-6149

(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

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

FILED
14 DEC 30 AM 11:30
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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:

Todd Construction Inc.
(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 Florida

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

on Jan 01 1996
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

Todd Construction LLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: Jan 01 2015
(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 all applicable statutes.

EFFECTIVE DATE

1/1/15

Signed this 26 day of December 2014.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: D T ml
Printed Name: Dennis Todd Title: _____

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

Signature: D T ml
Printed Name: _____ Title: PRESIDENT

Signature: [Signature]
Printed Name: Solomon Coker Title: VICE PRESIDENT

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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14 DEC 30 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE

Tom Construction LLC

1/1/15

(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:

Mailing Address:

927 SW Lake Roesiger Rd
Suwannee, WA 98290

927 SW Lake Roesiger Rd
Suwannee, WA 98290

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:

Dennis Todd

Name

2073 Cypress Ave

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

Ft Pierce

FL

34940

City

Zip

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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..

Dennis Todd

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

AMBR

AMBR

Name and Address:

Dennis Todd

2073 Cypress Ave
Ft. Pierce, FL 34949

Solomon Cook

3720 SW 59th Ter
DAVIE, FL 33314

Andrew Todd

927 SW Lake Road
Suwannee, FL 3250

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JAN 01 2015. (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:

Dennis Todd

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.)

Dennis Todd

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 DEC 30 AM 11:30

FILED