L15000022674

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	





300267861913

01/13/15--01006--008 **150.00

15 FEB -6 PHI2: 00 SECRETARY OF STATE

Г. **Т. ң**

T. HAMPTON

COVER LETTER

TO: Registration : Division of C			
SUBJECT: Rog	ger L. Campbell,	LLC	
	(Name	of Resulting Florida Limite	ed Company)
			nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
Robert E. Mitcl	nell (Contact Person)		
McElroy, Mitche	ell & Associates. (Firm/Company)	LLP	
P.O. Box 255	(Address)		
-Henderson, KY 4	2419-0255 City, State and Zip Code)		
rmitchell@mcelro	oymitchell.com e used for future annual re	port notifications)	
•	on concerning this ma	•	
Robert E. Mitc	hell	at (270) 827	-5828
(Name of Conta	ct Person)		time Telephone Number)
Enclosed is a check f	or the following amou	nt:	
\$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	S:	MAILING A	DDRESS:
Registration Section		Registration S	
Division of Corporati	ons	Division of C	-
Clifton Building	.	P. O. Box 632	
2661 Executive Center	er Circle	Tallahassee, l	FL 32314

Tallahassee, FL 32301

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Roger L. Campbell, LLC M14-124.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Kentucky
(Enter state, or if a non-U.S. entity, the name of the country)
on <u>1/1/2010</u> .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(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; <u>AND</u> 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.

Page 1 of 2

15 FEB - 5 PM 12: 00
SECRETARY OF STATE
SECRETARY OF STATE

Signed this 7 day of January	20 <u></u>
Signature of Authorized Representative of Lim	
Signature of Authorized Representative:	meso I / wel
Signature of Authorized Representative:	Tido
Printed Name: Roger L. Campbell	Ittle: Managing Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature: Rogin & Casual	
Printed Name: Roger L. Campbell	Title: Managing Member
Signature:Printed Name:	Titlet
Frinced Patrie.	1 nie:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florido Composition.	
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.	
TO THE SOLD OF THE STATE OF THE	- T ID
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnersnip:
organities of ADD General Farthers.	
All others:	
Signature of an authorized person.	
•	
Fees:	
	405.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Ontional)
Certified Copy: Certificate of Status:	\$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:			
Roger L. Campbell, LLC (Must end with the words "Limited Liability	ty Company, "	L.L.C.," or "LLC	.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal offi	ce of the Lim	ited Liability Company is:
Principal Office Address:	Mailing	Address:	
1295 Wales Drive	1295	Wales Driv	e
Fort Myers, FL 33901		Myers, FL	
The name and the Florida street address of the re Roger L. Campbell Name	gistered ag	gent are: 	
1295 Wales Drive Florida street address (P.O.	Box NOT	acceptable)	
Ft. Myers City	FI.	33901	
City	FL	Zip	
Having been named as registered agent and to liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe accept the obligations of my position as regi	this certific ty. I furthe erformance	ate, I hereby a ragree to com of my duties,	accept the appointment as uply with the provisions of all and I am familiar with and
Hogen & Com			TAS TS
Registered Agent's Signa	ture (REQ	UIRED)	TEB-
(CONTINU	JED)		ARY OF ARESEE.
Page 1 of 2	2		الم الم

MBR" = Authorized Member GR" = Manager GR	
<u>-</u>	
<u> </u>	Roger L. Campbell
	1295 Wales Drive
	Ft. Myers, FL 33901
<u> </u>	
se attachment if necessary)	
VI: Other provisions, if any	
OUIRED SIGNATURE:	
Roger of Ca	wan outhorized representative of a member
Signature of a member of	r an authorized representative of a member. (b), Florida Statutes, the execution of this document
Signature of a member of a mem	(b), Florida Statutes, the execution of this document ies of perjury that the facts stated herein are true.
Signature of a member of a mem	(b), Florida Statutes, the execution of this document ies of perjury that the facts stated herein are true. nitted in a document to the Department of State
Signature of a member of a mem	(b), Florida Statutes, the execution of this document ies of perjury that the facts stated herein are true. Initted in a document to the Department of State and for in s.817.155, F.S.)
Signature of a member of a mem	(b), Florida Statutes, the execution of this document lies of perjury that the facts stated herein are true. In itted in a document to the Department of State and for in s.817.155, F.S.)
Signature of a member of a mem	(b), Florida Statutes, the execution of this document ies of perjury that the facts stated herein are true. nitted in a document to the Department of State and for in s.817.155, F.S.)
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Signature of a member of a mem	(b), Florida Statutes, the execution of this document ies of perjury that the facts stated herein are true. Initted in a document to the Department of State and for in s.817.155, F.S.) I or printed name of signee
Signature of a member of a mem	(b), Florida Statutes, the execution of this document lies of perjury that the facts stated herein are true. In itted in a document to the Department of State and for in s.817.155, F.S.) I SEE OF THE STATE OF THE
Signature of a member of a mem	(b), Florida Statutes, the execution of this document lies of perjury that the facts stated herein are true. In itted in a document to the Department of State and for in s.817.155, F.S.) I SEE OF THE STATE OF THE
Signature of a member of a mem	(b), Florida Statutes, the execution of this document lies of perjury that the facts stated herein are true. Initted in a document to the Department of State and for in s.817.155, F.S.) I or printed name of signee Organization and Designation

ARTICLE IV-