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2015 FEB - 3 P 3 1 U

B. BOSTICK

FEB 11 2015

EVAMINED

TO: Registration : Division of C		•		1		
SUBJECT: MATTH	IEW J BROERMAN	, LLC				
SUBJECT:	(Name	of Resulting Florida	Limite	ed Company)	_	
				nd fees are submitted to coordance with s. 605.		"Other
Please return all corr	espondence concernin	g this matter to:				
MATTHEW J BRO	ERMAN					
MATTHEW J BRO	(Contact Person) ERMAN, LLC					
27335 JOLLY ROO	(Firm/Company) GER LANE					
	(Address)					
BONITA SPRINGS	S, FL 34135					
MATTBRO7@COM	City, State and Zip Code) MCAST.NET					~ <u>~</u> [
E-mail Address: (to b	e used for future annual re	port notifications)				1) enema (1)
For further informati	on concerning this ma	tter, please call:				
MATTHEW J BRO	ERMAN	239 _at ()	-8681	7.675	
(Name of Conta	act Person)	(Area Code)	(Day	rtime Telephone Number)		
Enclosed is a check f	or 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 Copy		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRES Registration Section Division of Corporat Clifton Building		Registra	ation S n of C	Corporations		

Tallahassee, FL 32314

INHS11 (02/14)

2661 Executive Center Circle

Tallahassee, FL 32301

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.

	(Enter Name of Other Business Entity)	
2. The "Other Business Entity"	CORPORATION	P15-7378
	(Enter entity type. Example: corporation, general partnership, common law or bu	
	FLORIDA	
First organized, formed or incor	porated under the laws of	non-U.S. entity, the name of the country)
JANUARY 22, 2015 on		non-U.S. entity, the name of the country)
on(date of organization, formation o	r incorporation)	
 The name of the Florida Lim MATTHEW J BROERMAN, I 	ited Liability Company as set forth in th	ne attached Articles of Organization:
(Enter N	CP1 11 11 1 11 11 11 11 C	'
(Eillei Na	ame of Florida Limited Liability Company)	
	f filing, enter the effective date:	,
4. If not effective on the date of (The effective date: 1) cannot date this document is filed by		2) must be the same as the effective
4. If not effective on the date of (The effective date: 1) cannot date this document is filed by date listed in the attached Art	f filing, enter the effective date:	2) must be the same as the effective ate is listed therein.)
4. If not effective on the date of (The effective date: 1) cannot date this document is filed by date listed in the attached Art	f filing, enter the effective date: be prior to date of receipt or filed date the Florida Department of State; ANI icles of Organization, if an effective date	O 2) must be the same as the effective ate is listed therein.)

		-	
Signed this day of	20 2015		
Signature of Authorized Representative of Limi	ited Liability Company:		
Signature of Authorized Representative: Printed Name: MATTHEW J BROERMAN	Title: MGR		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]		
Signature: MATTHEW J BROERMAN	Title: PRESIDENT		
Signature: Matthe J. Brown 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 of the Directors or Officers have not been selected, an Indiana.			
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	0.7	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	2015 FEB	
All others: Signature of an authorized person.	•	÷ ÷	FY
Fees:		رب 	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	i C	

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	Liability Company	is:			
MATTHEW J BROERN	IAN, LLC				
(Must end w	th the words "Limited Lia	ability Company, "L.L.C.," or "LLC	.")		
ARTICLE II - Address: The mailing address and		principal office of the Lim	ited Liability Company is:		
Principal Office Address:		Mailing Address:	Mailing Address:		
27335 JOLLY ROGER LANE BONITA SPRINGS, FL 34135			27335 JOLLY ROGER LANE BONITA SPRINGS, FL 34135		
(The Limited Liability Company of business entity with an active Flo	annot serve as its own Reported registration.)	red Office, & Registered Agistered Agent. You must designate			
The name and the Florida					
MAT	THEW J BROERN				
	Na				
	5 JOLLY ROGER				
	•	O. Box NOT acceptable)			
BON	ITA SPRINGS,	FL 34135			
	City	Zip			
liability company at registered agent and ag statutes relating to the	the place designated ree to act in this cap proper and complet	l in this certificate, I hereby a city. I further agree to con	nply with the provisions of all and I am familiar with and I for in Chapter 605, F.S		
R		gnature (REQUIRED)			
	(CONT)	INUED)			
	Page :	1 of 2			

ARTICLE IV- The name and address of each person at Company:	thorized to manage and control the Limited Liability
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	MATTHEW J BROERMAN 27335 JOLLY ROGER LANE
	BONITA SPRINGS, FL 34135
	

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:

(Use attachment if necessary)

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.)

MATTHEW J BROERMAN

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)