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(Cit	ty/State/Zip/Phone	e #)
☐ PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Eiling Officer	
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Office Use Only



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15 MAR 30 PH L: 57
SECRETARY OF STATE
TALLAHASSEE, FLORID.

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T. Burch MAR 3 1, 2015)

COVER LETTER

TO:	Registration S Division of C			
SUBJ	iect: G	OTSCHALL &	COMPANY, L of Resulting Florida Limite	LC
		(Name	of Resulting Florida Limite	d Company)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concerning	g this matter to:	
_/\	1ichael	Gotschall (Contact Person)		
		(Contact Person)		
	20 <i></i>	(Firm/Company)		
28	103 Jumn	ner Brooke h	Jay	
Ca	sselberry	rer Brooke N (Address) FL 327 (City, State and Zip Code)	07	
	J ₍₍	City, State and Zip Code)		
E-r	nail Address: (to b	hall Og Mail. e used for future annual re	port notifications)	
For fu	ırther informati	on concerning this ma	tter, please call:	
<u>M.</u>	Gotschall	<u>.</u>	at (<u>401</u>) <u>42</u> (Area Code) (Day	22-4038
	(Name of Conta	ct Person)	(Area Code) (Day	time Telephone Number)
Enclo	sed is a check f	or the following amou	nt:	
(\$25 fc & \$12:	60.00 Filing Fees or Conversion 5 for Articles anization)	\$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
Regis Divis Clifte 2661	EET ADDRESS tration Section ion of Corporat in Building Executive Cent	ions er Circle	MAILING A Registration S Division of C P. O. Box 633 Tallahassee, I	Section Forporations 27

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 11, 2015

MICHAEL GOTSCHALL 2805 SUMMER BROOKE WAY CASSELBERRY, FL 32707

SUBJECT: GOTSCHALL & COMPANY, LLC

Ref. Number: W15000017332

We have received your document for GOTSCHALL & COMPANY, 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Regulatory Specialist II Letter Number: 215A00004953

www.sunbiz.org

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of	Conver	sion is	3:
Gotschall & Company, Inc. (Enter Name of Other Business Entity)	TAE SE	5	
2. The "Other Business Entity" is a <u>Cor Poration</u> .	AHA	HAR 3	-tarez
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	S	30	لاغور عند. أ
First organized formed or incorporated under the laws of Florida	-11/2		1 42 5 mg
on 3-24-2009 (Enter state, or if a non-U.S. entity, the name (date of organization, formation or incorporation)	(日) (日) (日)	untry)	فروسية
(date of organization, formation or incorporation)	>		
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of	of Orga	nizati	on:
Gotschall & Company, LLC (Enter Name of Florida Limited Liability Company)			
(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 date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the sam			
date listed in the attached Articles of Organization, if an effective date is listed therein.)		, 01100	

Page 1 of 2

5. The plan of conversion has been approved in accordance with all applicable statutes.

1 1		
Signed this 18th day of February	20_[5	
Signature of Authorized Representative of Limi		
Signature of Authorized Representative: 25 Printed Name: Mchael Gotschall	Title: fresdent /Director/C	Authoiz hairman/Membe
Signature(s) on behalf of Other Business Entity:		
Signature: Printed Name: Wichael Edschall	_ Title: President Pirecto/ Cha	irman
Signature:		
Signature:Printed Name:	Title:	
Signature:Printed Name:	_ Title:	
Signature:Printed Name:		
Printed Name:	_ Title:	,,,
Signature:Printed Name:	_ Title:	~ - 20
Signature:		SS CO I
Printed Name:	_ Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.		STALE LORIDA
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.	y Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
GOTSCHALL & COMPANY, LLC	
(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 Limit	tad Liahility Campany ia
the maining address and siteet address of the principal office of the Emili	ted Liability Company is.
Principal Office Address: Mailing Address:	
1995 Cumper Brooker Wall	47
2805 Summer Brooke Way Casselberry, FL 32707 Winter Park,	FL 3279.3
ARTICLE III - Registered Agent, Registered Office, & Registered A (The Limited Liability Company cannot serve as its own Registered Agent. You must designate a	
business entity with an active Florida registration.)	ar marriagn or anomo.
The name and the Florida street address of the registered agent are:	15 ALL
Michael Gotschall Name	A C
Name	
2805 Summer Brooke Way	PH L: 5
Florida street address (P.O. Box NOT acceptable)	STA LOA
Casselberry FL 32707 City Zip	<u> </u>
Casselberry FL 32707 City Zip	-
City	
Having been named as registered agent and to accept service of process	·
liability company at the place designated in this certificate, I hereby e	
registered agent and agree to act in this capacity. I further agree to com statutes relating to the proper and complete performance of my duties,	
accept the obligations of my position as registered agent as provided	
, , , , , , , , , , , , , , , , , , ,	,
Trim	
Registered Agent's Signature (REQUIRED)	-
5 -B (((((((

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager AMBR	Michael Gotschall Po Box 4247 Winter Parky FL 32707	
	TALLAHASSEE	2 124186
	DF STA	
	ne date of filing: (OPTIONA	L)
ARTICLE V: Effective date, if other than th	D.F.	L)
REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (constitutes an affirmation under the pendamental am aware that any false information succonstitutes a third degree felony as proving the date of the date must of the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (constitutes an affirmation under the pendamental am aware that any false information succonstitutes a third degree felony as proving the date of the dat	er or an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document that the facts stated herein are true, ubmitted in a document to the Department of State	L) lays prid

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)