L1500009716

(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:
WK-30288

Office Use Only

W15-



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05/26/15--01056--014 **51.25

04/24/15--01010--015 **128.75

2015 HAY 26 AM 10: 59

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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 29, 2015

VIRGINIA HUNTER HUBERT 641 W. JOHNS CREEK PKWY ST. AUGUSTINE, FL 32092

SUBJECT: HUNTER POWER & ENERGY LLC

Ref. Number: W15000030288

15 MAY 27 PM 4: 43
SECRETARY OF STATE

We have received your document for HUNTER POWER & ENERGY LLC and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The fees to file the Certificate of Conversion and Articles of Organization total \$150.00 (\$25 filing fee for the Certificate of Conversion, \$100 filing fee for the Articles of Organization, and \$25 for the Registered Agent Designation). Enclose an additional \$30 for each certified copy requested and an additional \$5 for each certificate of status requested.

There is a balance due of \$51.25.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6051.

Deborah Bruce Regulatory Specialist II 5 HAY 26 AM 10: 59

www.sunbiz.org

Letter Number: 615A00008786

COVER LETTER

	ation Section n of Corporations		·	
SUBJECT: _	HUNTER HOUSE?	ENCE by esulting Florida Limite	d Company)	
	Articles of Conversion, Articles on the conversion of the conversi			
Please return al	Il correspondence concerning thi	is matter to:		
VIR	CONTECT HUBE	let		
	(Firm/Company)			
641 W	· JOHNS CREEK PRO (Address)	- - -		
ST. AUG	(City, State and Zip Code)			
Qinger E-mail Addres	hubert 1e 4ahoo. C	notifications)		
For further info	ormation concerning this matter,	please call:		
(Name o	f Contact Person) heck for the following amount:	(Area Code) (Day	time Telephone Number) Ple Independent	2015 M
\$150.00 Filing (\$25 for Conversion & \$125 for Article of Organization)	on and Certificate of an	\$180.00 Filing Fees d Certified Copy	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	AY 26 AH ID: 5
STREET ADD Registration Se Division of Con Clifton Buildin	ection rporations	MAILING A Registration S Division of C P. O. Box 632	Section orporations	55 P

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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 Conversion is: HUNTER POWER ENERBY LUC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Color Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of NOKIN CHECKER
on 6/89/11 (Enter state, or if a non-U.S. entity, the name of the country) (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)
(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; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2



Signed this 15	day of MAY	20 15
Signature of A	uthorized Representative of Lin	nited Liability Company:
Signature of Au Printed Name: <u>V</u>	uthorized Representative: Una	ina Hunter Dubert
Signature(s) on	behalf of Other Business Entity:	[See below for required signature(s)]
Signature: _	Decco Lantono	Title: PRBIDENT
Printed Name: r	REBECCH SANTONO	Title: PRESIDENT
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Cionatura		
Printed Name:		Title:
If Florida Corp		
Signature of Cha	airman, Vice Chairman, Director, or	
If Directors or O	Officers have not been selected, an In	ncorporator must sign.
	eral Partnership or Limited Liabil General Partner.	lity Partnership:
	ted Partnership or Limited Liabil LL General Partners.	ity Limited Partnership:
All others: Signature of an a	authorized person.	
Fees:		
Fees for Certified	of Conversion: Florida Articles of Organization: I Copy: ate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

Page 2 of 2



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
HUNTER YOWER ENER	R6y	
ARTICLE II - Address: The mailing address and street address of the prin		oility Company is:
Principal Office Address:	Mailing Address:	
641 W. JOHNS CREEK PKWY ST. ANGUSTIFE FU 30092	SAME	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)		
The name and the Florida street address of the re-	gistered agent are:	
VIRCINIA HUNT	ER HUBERT	
Name		
641 W. JOHNS CR	EEK PKWY	
Florida street address (P.O.	Box NOT acceptable)	
ST. AUGUSTINE City	FL 32092	
City	Zip	
Having been named as registered agent and to liability company at the place designated in tregistered agent and agree to act in this capacity statutes relating to the proper and complete peaccept the obligations of my position as regis	this certificate, I hereby accept they. I further agree to comply with erformance of my duties, and I an	e appointment as the provisions of all n familiar with and
Verginia Uni	ter Thebeat	
Registered Agent's Signa	ture (REQUIRED)	ALEAD ALEAD
(CONTINU	(ED)	ASSE TO
Page 1 of 2	2	6 AMIO

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Typed or printed name o	WOOFT OF S
Filing Fees	

Page 2 of 2

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

ARTICLE IV-