# 11500172070

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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,		,
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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15 SEP 30 PM 2: 03

SEPERIOR SERVICES

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#### **COVER LETTER**

33.3

TO: Registration Section Division of Corporations	•	
SUBJECT:(Nam	PANDMORE LLC	<u></u>
	icles of Organization, and fees are submitted to e Liability Company" in accordance with s. 605.1	
Please return all correspondence concern	ing this matter to:	
Scott Bray to (Contact Person)		
LPANDMORE (Firm/Company)		
1520 Jeves Ave (Address)		
PANAMA CITY; FL (City, State and Zip Code		
E-mail Address: (to be used for future annual	report notifications)	
For further information concerning this m	natter, please call:	
Scott Brayton (Name of Contact Person)	at ( <u>\$50</u> ) <u>481 - 1680</u> (Area Code) (Daytime Telephone Number)	_
Enclosed is a check for the following amo	ount:	
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  ☐ \$155.00 Filing Fees and Certificate of Status		
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	FILE 15 SEP 30 SUCKELARYS ALLARIANSE

INHS11 (06/15)

Tallahassee, FL 32301

## Articles of Conversion For "Other Business Entity" Into

## FILED 15 SEP 30 PH 2: 03

#### Florida Limited Liability Company

SECRETARY OF STATE FALLAHASSEE, FLORIDA

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:
(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 WAWAV, WI 54403
First organized, formed or incorporated under the laws of <u>WAUAU</u> , <u>WT 54403</u> on <u>8/22/2014</u> (date of organization, formation or incorporation)  (Enter state, or if a non-U.S. entity, the name of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LPANDMORE LLC
(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 28th day of September	20 1	
Signature of Authorized Representative of Limi	·	
Signature of Authorized Representative:		
Printed Name: Scott Bray ton	Title: Owner	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
Signature:		
Printed Name: Scott Brayton	Title: Owner	_
,	••••	
Signature:		<del></del>
Signature: Printed Name:	Title:	_
Signature:Printed Name:	Title	
Frinted Name.	1 ttle	_
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:		
Signature:Printed Name:		
Printed Name:	Title:	
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Director, or		
If Directors or Officers have not been selected, an Inc	corporator must sign.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnersnip;	
Signature of one General Farther.	••••	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:	
Signatures of ALL General Partners.		
All others:	•	•
Signature of an authorized person.		
Fees:		
1000.		1.7*
Articles of Conversion:	\$25.00	
Fees for Florida Articles of Organization:	\$125.00	3 - 7' 141
Certified Copy:	\$30.00 (Optional)	₹ <u>.</u>
Certificate of Status:	\$5.00 (Optional)	+++++
	· •	1 1 - 2773

Page 2 of 2

FILED
5 SEP 30 PM 2: 03

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY FILED **ARTICLE I - Name:** 15 SEP 30 PH 2: 03 The name of the Limited Liability Company is: SECRETARY OF STATE (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: 1520 Jen KS Ave Ste B PANAMA CITY, FL 32405 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: Scott Brayton Name 1520 Jeuks Ave StE B Florida street address (P.O. Box NOT acceptable) PANAMA CITY FL 3240T City Zip 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.. Registered Agent's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager AmB人	C. H. Bon to	
7111131	Scott Brayton 1520 Jenks Ave StE B	
	PANAMA City, FC 32405	
	PARAMA CITY 1. 5 30103	
	. ,	
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effective date is listed, the date must be	date of filing: (OPTIONAL) be specific and cannot be more than five business	AL) day
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The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

Company: