

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	,
(Ci	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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SECTATION AT STATE
TACLARIASSEE, FLORIGA

COVER LETTER

Division of C	Corporations		
SUBJECT: Henry Sto	one Solutions, LLC		
SUBJECT.		of Resulting Florida Limite	d Company)
	-		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
Deborah L Henry			
	(Contact Person)		
Henry Stone Solutions L	LC		
	(Firm/Company)		
1520 Bream St			
	(Address)		
Merritt Island FL 32952			
(6	City, State and Zip Code)		
henrystonesolutions@gn	nail.com		
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
Deborah L Henry		_at ()_617-1	1198
(Name of Conta	ct Person)		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)	S155.00 Filing Fees and Certificate of Status	S180.00 Filing Fees and Certified Copy	S185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAILING A	
Registration Section Division of Corporat	ions	Registration S Division of C	
Clifton Building	10113	P. O. Box 63:	-
2661 Executive Cent	er Circle	Tallahassee,	

Tallahassee, FL 32301

TO: Registration Section

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 Bus Henry Stone Solutions LLC	iness Entity" immediately prior to the filing of the Articles of Conversion is:
<u></u>	(Enter Name of Other Business Entity)
2. The "Other Business Entity"	Limited Liability Company
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or inco	rporated under the laws of Virginia
2 September 2012	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation of	or incorporation)
3. The name of the Florida Lin	nited Liability Company as set forth in the attached Articles of Organization:
Henry Stone Solutions LLC	
(Enter N	ame of Florida Limited Liability Company)
(The effective date: 1) cannot date this document is filed by date listed in the attached Art	f filing, enter the effective date: 1 January 2016 t be prior to date of receipt or filed date nor more than 90 days after the the Florida Department of State; AND 2) must be the same as the effective ticles of Organization, if an effective date is listed therein.) k does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
5. The plan of conversion has b	een approved in accordance with all applicable statutes.

Page 1 of 2



Signed this day of _December	_ 20_15
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Duba Printed Name: Deborah L Henry	Title: Owner, Managing Member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Debolat L Hevry	
Printed Name: DEBORAH L HENRY	_ Title: <u>OWNBL, MANAGING MBR</u>
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty 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 I - Name: The name of the Limited Liability Company	y is:
Henry Stone Solutions LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address:	
	e principal office of the Limited Liability Company is:
Č	
Principal Office Address:	Mailing Address:
1520 Bream St	1520 Bream St
Merritt Island FL 32952	Merritt Island FL 32952
(The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of t	he registered agent are:
Deborah L Henry	
N	ame
1520 Bream St	
Florida street address (P.O. Box <u>NOT</u> acceptable)
Merritt Island	FL 32952
City	Zip
Having been named as registered agent at	nd to accept service of process for the above stated limite

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)

(CONTINUED)

Page 1 of 2

ARTICLE IV-

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

'AMBR" = Authorized Member	
'MGR" = Manager AMBR	1520 Bream St
AWIDK	Merritt Island FL 32952
	Metric India L 02/02
LE V: Effective date, if other than the	he date of filing: 1 January 2016 (OPTIONA)
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) the date inserted in this block does not meen affective date on the Department of States.	t be specific and cannot be more than five business dut the applicable statutory filing requirements, this date will not be l
fective date is listed, the date mus days after the date of filing.) the date inserted in this block does not mee is effective date on the Department of State LE VI: Other provisions, if any. REQUIRED SIGNATURE:	t be specific and cannot be more than five business dut the applicable statutory filing requirements, this date will not be l
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LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) The date inserted in this block does not mee is effective date on the Department of State LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb This document is executed in I am aware that any false infor constitutes a third degree felor	the applicable statutory filing requirements, this date will not be let's records. The records and cannot be more than five business determines the applicable statutory filing requirements, this date will not be let's records. The records are authorized representative of a member accordance with section 605.0203 (1) (b), Florida Statutes, contain submitted in a document to the Department of State may as provided for in s.817.155, F.S.
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) The date inserted in this block does not mee as effective date on the Department of State LE VI: Other provisions, if any. Signature of a membor This document is executed in I am aware that any false infor constitutes a third degree felor	the applicable statutory filing requirements, this date will not be le's records. The applicable statutory filing requirements, this date will not be le's records. The applicable statutory filing requirements, this date will not be lee's records. The applicable statutory filing requirements, this date will not be lee's records. The applicable statutory filing requirements, this date will not be lee's records.