L 60003943

(Re	equestor's Name)	
(Ad	dress)	
. (Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

JAN 1 1 2016 T. SCOTT



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12/28/15--01036--002 **180.00

15 DEC 28 MHII: 40

December 23, 2015

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Filing Articles of Conversion

DESIGN AIRE, LLC

LZ order #515360769



Dear Sir or Madam:

Attached for filing please find the Articles of Conversion of the above-referenced corporation. Enclosed, please find a check for \$180.00 for the filing fee and certified copy fee. Please process this application as quickly as possible and send the filed copy to me at the address below:

Legalzoom.com, Inc. 100 W. Broadway Suite 100 Glendale, CA 91210

If you have any questions, please call me at (323) 962-8600. Thank you for your help in this matter.

Sincerely,

Imelda Vasquez LegalZoom.com

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DESIGN AIRE, LLC		
(Name o	of Resulting Florida L	imited Company)
The enclosed Certificate of Conversion, Art Business Entity" into a "Florida Limited Lia		ion, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	
Imelda Vasquez		
(Contact Person)		
LegalZoom.com, Inc.		
(Firm/Company)		
100 W. Broadway Suite 100		
(Address)		
Glendale, CA 91210		
(City, State and Zip Code)		
designaire@bellsouth.net		
E-mail Address: (to be used for future annual rep	port notifications)	
For further information concerning this mat	tter, please call:	
lmelda Vasquez	_at (<u>323</u>)	962-8600 ext 7950
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou	ınt:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing F and Certified Copy	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Registra Division P. O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314

Certificate of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

This Certificate 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 this Certificate of Conversion is: DESIGN AIRE, INC. (1) (1) (2) (3) (4) (1) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a Corporation
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fir	st organized, formed or incorporated under the laws of FL
on	05/02/2005 (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:
DE	SIGN AIRE, LLC
	(Enter Name of Florida Limited Liability Company)
(TI dat	If not effective on the date of filing, enter the effective date: ne effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the te this document is filed by the Florida Department of State; AND 2) must be the same as the effective te listed in the attached Articles of Organization, if an effective date is listed therein.)
5	The plan of conversion has been approved in accordance with ss. 605 1041-605 1046

Page 1 of 2

Signed this 15 ⁷¹ day of DECEMBER 20 15 15.			
Signature of Authorized Representative of Limi			
Signature of Authorized Representative:	JQ_		
Signature(s) on behalf of Other Business Entity:			
Signature:			
Printed Name: William T. Parker	Title: President		
Signature:Printed Name:	Title:		
Signature:Printed Name:	Title:		
Signature:			
Signature:Printed Name:	Title:		
Signature:			
Signature:Printed Name:	Title:		
Signature:			
Signature:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer.		
If Florida General Partnership or Limited Liabili	ty Partnership:		
Signature of one General Partner.			
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.			
Fees:			
Articles of Conversion: Fees for Florida Articles of Organization: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	DESIGN	AIRE, LLC
(Must		Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Add The mailing address		ne principal office of the Limited Liability Company
The manning address	and street address of the	to principal office of the Emilieu Elaonity Company
Principal Office Ad	ldress:	Mailing Address:
333 Rosebud Circle		333 Rosebud Circle
Franklin, Tennessee	37064	Franklin, Tennessee 37064
(The Limited Liability Conbusiness entity with an ac	npany cannot serve as its own	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
(The Limited Liability Con business entity with an ac	npany cannot serve as its own tive Florida registration.)	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
(The Limited Liability Conbusiness entity with an ac	npany cannot serve as its own tive Florida registration.)	Registered Agent. You must designate an individual or another
(The Limited Liability Conbusiness entity with an ac	npany cannot serve as its own tive Florida registration.) orida street address of Thomas L Overbey	Registered Agent. You must designate an individual or another
(The Limited Liability Conbusiness entity with an action of the name and the Fl	npany cannot serve as its own tive Florida registration.) orida street address of Thomas L Overbey	Registered Agent. You must designate an individual or another the registered agent are:
(The Limited Liability Conbusiness entity with an action of the name and the Fl	npany cannot serve as its own tive Florida registration.) Iorida street address of Thomas L Overbey N 25032 Oaks Blvd.	Registered Agent. You must designate an individual or another the registered agent are:
(The Limited Liability Conbusiness entity with an ac	npany cannot serve as its own tive Florida registration.) Iorida street address of Thomas L Overbey N 25032 Oaks Blvd.	Registered Agent. You must designate an individual or another the registered agent are: Jame P.O. Box NOT acceptable)
(The Limited Liability Conbusiness entity with an ac	npany cannot serve as its own tive Florida registration.) lorida street address of Thomas L Overbey 25032 Oaks Blvd. Florida street address of	Registered Agent. You must designate an individual or another the registered agent are:

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

15 DEC 28 AM II: LP

"AMBR" = Authorized Member "MGR" = Manager AMBR	William T. Parker
	William T. Parker
<u>AMBR</u>	William T. Parker
	333 Rosebud Circle
	Franklin, Tennessee 37064
(Use attachment if necessary)	
LE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	1(1)
Ül	J O
Signature of a member of	or an authorized representative of a member. (b). Florida Statutes, the execution of this document
Signature of a member of accordance with section 605.0203 (1)	or an authorized representative of a member. (b), Florida Statutes, the execution of this document ties of perjury that the facts stated herein are true.
Signature of a member of accordance with section 605.0203 (1) stitutes an affirmation under the penalt n aware that any false information subm	(b), Florida Statutes, the execution of this document ites of perjury that the facts stated herein are true. mitted in a document to the Department of State
Signature of a member of accordance with section 605.0203 (1) stitutes an affirmation under the penalt	(b), Florida Statutes, the execution of this document ites of perjury that the facts stated herein are true. mitted in a document to the Department of State
Signature of a member of accordance with section 605.0203 (1) stitutes an affirmation under the penalt n aware that any false information subm	(b), Florida Statutes, the execution of this document ies of perjury that the facts stated herein are true. mitted in a document to the Department of State ed for in s.817.155, F.S.)
Signature of a member of accordance with section 605.0203 (1) stitutes an affirmation under the penalt in aware that any false information substitutes a third degree felony as provide	(b), Florida Statutes, the execution of this document ites of perjury that the facts stated herein are true. mitted in a document to the Department of State ed for in s.817.155, F.S.)
Signature of a member of accordance with section 605.0203 (1) stitutes an affirmation under the penalt in aware that any false information substitutes a third degree felony as provide	(b), Florida Statutes, the execution of this document ies of perjury that the facts stated herein are true. mitted in a document to the Department of State ed for in s.817.155, F.S.)
Signature of a member of accordance with section 605.0203 (1) stitutes an affirmation under the penalt in aware that any false information substitutes a third degree felony as provided Types	(b), Florida Statutes, the execution of this document ites of perjury that the facts stated herein are true. mitted in a document to the Department of State ed for in s.817.155, F.S.)
Signature of a member of accordance with section 605.0203 (1) stitutes an affirmation under the penalt in aware that any false information substitutes a third degree felony as provide	(b), Florida Statutes, the execution of this document lies of perjury that the facts stated herein are true. mitted in a document to the Department of State ed for in s.817.155, F.S.) William T. Parker d or printed name of signee
REQUIRED SIGNATURE:	

Page 2 of 2