110000004644

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

Office Use Only



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12/30/15--01017--005 **155.00

15 DEC 30 AM 8: 13

COVER LETTER

TO:	Registration S Division of Co				
SUBJ	ECT: RESTORA	ATION CONSTRUCTION	N LLC		
5020		(Name o	of Resulting Florida I	imited	d Company)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this matter to:		
DAVI	D TORCHIN, CPA	A			
		(Contact Person)			
DAVI	D TORCHIN, CPA	A, PA			
		(Firm/Company)			
2300 (GLADES ROAD, S	SUITE 205E			
<u></u>		(Address)			
BOCA	RATON, FL 334	31			
	(0	City, State and Zip Code)			
rccorp	ofl@gmail.com				
E-1	nail Address: (to b	e used for future annual re	port notifications)		
For fu	ırther informatio	on concerning this ma	tter, please call:		
SHAN	IE HANRAHAN		_at ()	471-5	
	(Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
Enclo	sed is a check f	or the following amou	nt:		
(\$25 fo & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	\$155,00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		S185.00 Filing Fees, Certified Copy, and Certificate of Status
STR	EET ADDRES	S:	MAILI	NG A	ADDRESS:
	tration Section		Registra		
	ion of Corporat	ions			Corporations
	on Building Executive Cent	an Cinala	P. O. Bo		27 FL 32314
	hassee, FL 323		i anana:	55CC, 1	IL 32314

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 Busines RESTORATION CONSTRUCTION COI	ss Entity" immediately prior to the filing of the Articles RP .	s of Conversion is:
(Ent	ter 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.)	
First organized, formed or incorpor	rated under the laws of FLORIDA	
01/01/2014	(Enter state, or if a non-U.S. entity, the n	name of the country)
(date of organization, formation or inc	corporation)	
3. The name of the Florida Limited	d Liability Company as set forth in the attached Artic	les of Organization:
RESTORATION CONSTRUCTION LLC	c	
(Enter Name	of Florida Limited Liability Company)	
4. If not effective on the date of fil	ling, enter the effective date:	
(The effective date: 1) cannot be date this document is filed by the date listed in the attached Article	prior to date of receipt or filed date nor more than Florida Department of State; <u>AND</u> 2) must be the es of Organization, if an effective date is listed there es not meet the applicable statutory filing requirements, this date	same as the effective
5. The plan of conversion has been	approved in accordance with all applicable statutes.	

Page 1 of 2

FILED

SECRETAGE PER ORIGA

	•	
	Signed this 29TH day of DECEMBER	20_15
	Signature of Authorized Representative of Limi	ited Liability Company:
Ø	Signature of Authorized Representative:	Hoursham
	Printed Name: SHANE HANRAHAN	Title: AMBR
	Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
B	Signature: Hornsham	
Š	Signature: Framaria	
	Printed Name: SHANE HANRAHAN	Title: PRESIDENT
	Signature:	
	Printed Name:	Title:
	Signature:Printed Name:	
	Printed Name:	Title:
	Signature:Printed Name:	Tide
	Printed Name:	Title:
	Signature	
	Signature:Printed Name:	Title
	Timed Name.	
	Signature:	
	Signature: Printed Name:	Title:
	If Florida Corporation:	
	Signature of Chairman, Vice Chairman, Director, or	Officer.
	If Directors or Officers have not been selected, an In-	corporator must sign.
	If Florida General Partnership or Limited Liabili	ty Partnership:
	Signature of one General Partner.	
	If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
	Signatures of <u>ALL</u> General Partners.	
	A.D A)	
	All others:	
	Signature of an authorized person.	
	Face	
	Fees:	
	Articles of Conversion:	\$25.00
	Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Ontional)
	Certified Copy:	\$30.00 (Optional)
	Certificate of Status:	\$5.00 (Optional)

SECALIAR OF TORH

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company	is:	
RESTORATION CONSTRUCTION LLC		
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limited Liabilit	ty Company is:
Principal Office Address:	Mailing Address:	
571 SE 3RD TERRACE	571 SE 3RD TERRACE	
POMPANO BEACH, FL 33060	POMPANO BEACH, FL 33060	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	egistered Agent. You must designate an individual o	nature: or another 15 DEC 3
SHANE HANRAHAN		
Na	ame	
571 SE 3RD TERRACE		8: 1 0:23
Florida street address (F	P.O. Box NOT acceptable)	8: 13
POMPANO BEACH	FL 33060	
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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Company.	3	
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	SHANE HANRAHAN	
MGK	571 SE 3RD TERRACE	
	POMPANO BEACH, FL 33060	
		
(Use attachment if necessary) TICLE V: Effective date, if other than the an effective date is listed, the date must	e date of filing: 01/01/02016 . (OP	TIONAL) siness days pr
TICLE V: Effective date, if other than the an effective date is listed, the date must or 90 days after the date of filing.)	be specific and cannot be more than five but the applicable statutory filing requirements, this date wi	siness days pr
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The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-