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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

16 JAN 26 PH 2: 1



COVER LETTER

SUBJECT: Harmitou & Chillips Lic (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
(Contact Person) Hamilton Flillips LLC (Firm/Company)
(Address)
(City, State and Zip Code)
E-mail Address: No be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (5/3) LOSG - 7480 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion and Certificate of Status Status \$150.00 Filing Fees and Certified Copy \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Cliffon Building Division of Corporations P. O. Boy 6227
Clifton Building P. O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO: Registration Section Division of Corporations

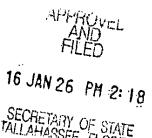
Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company



The Articles of Conversion and attached Articles of Organization 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 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on(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: 1 12 16. (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.
document's effective date on the Department of State's records.

Page 1 of 2

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this Zoll day of Jawary	_20 <u>1Ce</u>		
Signature of Authorized Representative of Limi	ted Liability Company:		
Signature of Authorized Representative: Printed Name: LAURA PILLUP	Title: MANAGERIA MEN	nBER	7
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature: Printed Name: LAVAR OHULI DB	Title: VICE PRESIDENT		
Signature:			
Printed Name:	Title:		
Signature:			
Signature: Printed Name:	Title:		
Signature:			
Signature: Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:	ZEC SEC	Č
If Florida Corporation:		哥	7.1
Signature of Chairman, Vice Chairman, Director, or	Officer.	名包	ċ
If Directors or Officers have not been selected, an Inc		m _{Ol}	-
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	STATE	-
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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)		

16 JAN 26 PM 2



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
(Must end with the words "Limited Liability	D Citilli P5 UC y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3447 BROOK (ROSSING-DR BRANDON, FL 33511	5ame
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	-
LAURA OIL. Name	6 JAN 26
Florida street address (P.O.	CROSSING TO THE
Barnson	FL 33511 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)

(CONTINUED)

Page 1 of 2

AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
mich	LANDA CHILLIPS
	BRANDON FL 33511
	
	PATE :
E V: Effective date, if other than the ective date is listed, the date must	
ective date is listed, the date must lays after the date of filing.)	be specific and cannot be more than five business d the applicable statutory filing requirements, this date will not be I
E V: Effective date, if other than the ective date is listed, the date must lays after the date of filing.) e date inserted in this block does not meet the effective date on the Department of State'	be specific and cannot be more than five business d the applicable statutory filing requirements, this date will not be I
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E V: Effective date, if other than the ective date is listed, the date must ays after the date of filing.) e date inserted in this block does not meet to effective date on the Department of State? E VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a member of a mem	the applicable statutory filing requirements, this date will not be less records. r or an authorized representative of a member. eccordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State as provided for in s.817.155, F.S.
E V: Effective date, if other than the ective date is listed, the date must lays after the date of filing.) e date inserted in this block does not meet to effective date on the Department of State? E VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a member This document is executed in an I am aware that any false inform constitutes a third degree felony	r or an authorized representative of a member. ccordance with section 605.0203 (1) (b), Florida Statutes. nation submitted in a document to the Department of State

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

ARTICLE IV-