

L16000044667

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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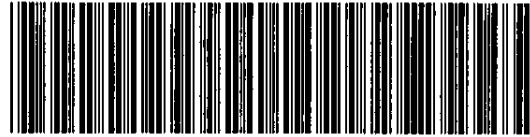
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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16 MAR -4 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WILMAC4, LLC

(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:

Justin J. Klatsky, Esq.

(Contact Person)

Owens Law Group, P.A.

(Firm/Company)

811-B Cypress Village Blvd.

(Address)

Ruskin, FL 33573

(City, State and Zip Code)

gocekdonna@gmail.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Alissa M. Costabile

at ( 813 ) 633-3396 ext. 306

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$150.00 Filing Fees  
(\$25 for Conversion  
& \$125 for Articles  
of Organization)

☐ \$155.00 Filing Fees  
and Certificate of  
Status

☐ \$180.00 Filing Fees  
and Certified Copy

☐ \$185.00 Filing Fees,  
Certified Copy, and  
Certificate of Status

### STREET ADDRESS:

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

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 27, 2016

JUSTIN J. KLATSKY, ESQ.  
OWENS LAW GROUP, P.A.  
811-B CYPRESS VILLAGE BLVD  
RUSKIN, FL 33573

SUBJECT: WILMAC4, LLC  
Ref. Number: W16000005755

We have received your document for WILMAC4, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 516A00001778

RECEIVED  
15 JAN -1 PM 12:56  
REGISTRY OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF CONVERSION  
FOR  
"OTHER BUSINESS ENTITY"  
INTO  
FLORIDA LIMITED LIABILITY COMPANY**

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TALLAHASSEE FLORIDA

This Certificate of Conversion and attached Articles of Organization and Plan of Conversion are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with section 605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

**WILMAC4, INC.**

2. **WILMAC4, INC.**, is a corporation first incorporated under the laws of Florida on March 1, 1999.

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization is:

**WILMAC4, LLC**

4. The Effective date will be as stated in the attached Articles of Organization.

Signed this 3 day of December, 2015.

WITNESSES:

"OTHER BUSINESS ENTITY"  
**WILMAC4, INC.**

Coby Sullenger  
Print Name: Coby Sullenger  
Susan Emerson  
Print Name: Susan Emerson

By: Mark W. McKinney  
**MARK W. MCKINNEY**  
Title: President, Director, Shareholder

Susan Emerson  
Print Name: Susan Emerson

By: Mary Jo Brick  
**MARY JO BRICK**  
Title: Vice President, Director

Coby Sullenger  
Print Name: Coby Sullenger

Susan Emerson  
Print Name: Susan Emerson

Coby Suttenger  
Print Name: Coby Suttenger

Susan Emerson  
Print Name: Susan Emerson

Coby Suttenger  
Print Name: Coby Suttenger

WITNESSES:

Susan Emerson  
Print Name: Susan Emerson

Coby Suttenger  
Print Name: Coby Suttenger

Susan Emerson  
Print Name: Susan Emerson

Coby Suttenger  
Print Name: Coby Suttenger

Susan Emerson  
Print Name: Susan Emerson

Coby Suttenger  
Print Name: Coby Suttenger

By: Donna M. Gocsek  
**DONNA M. GOCEK**  
Title: Secretary, Director,  
Shareholder

By: Laurie Ann Wright  
**LAURIE ANN WRIGHT**  
Title: Treasurer, Director, Shareholder

"LIMITED LIABILITY COMPANY"  
WILMAC4, LLC

By: Mark W. McKinney  
**MARK W. MCKINNEY**  
Title: Manager

By: Donna M. Gocsek  
**DONNA M. GOCEK**  
Title: Manager

By: Laurie Ann Wright  
**LAURIE ANN WRIGHT**  
Title: Manager

**ARTICLES OF ORGANIZATION  
FOR  
WILMAC4, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

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TALLAHASSEE FLORIDA

**ARTICLE I-Name:**

The name of the Limited Liability Company is:

**WILMAC4, LLC**

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address**

9417 NW 43RD STREET  
GAINESVILLE, FL 32653

**Mailing Address**

9417 NW 43RD STREET  
GAINESVILLE, FL 32653

**ARTICLE III- Registered Agent and Registered Office:**

The name and the Florida street address of the Registered Agent is:

**DONNA M. GOCEK**  
9417 NW 43RD STREET  
GAINESVILLE, FL 32653

*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.*

  
\_\_\_\_\_  
**DONNA M. GOCEK, Registered Agent**

**ARTICLE IV- Manager:**

The name and address of each Manager is as follows:

<u>Title:</u>	<u>Name and Address</u>
MGR	MARK W. MCKINNEY 9417 NW 43RD STREET GAINESVILLE, FL 32653
MGR	DONNA M. GOCEK 9417 NW 43RD STREET GAINESVILLE, FL 32653
MGR	LAURIE ANN WRIGHT 9417 NW 43RD STREET GAINESVILLE, FL 32653

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TALLAHASSEE FLORIDA

**ARTICLE V - Effective Date:**

The Effective Date of this Limited Liability Company shall be deemed to have commenced on filing.

Signed this 3 day of December, 2015.

*In accordance with section 605.0203(1)(B), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)*



MARK W. MCKINNEY, MGR



DONNA M. GOCEK, MGR



LAURIE ANN WRIGHT, MGR