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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ocala Publications, 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:

Tommy D. Permenter, Jr.	., Esquire			
	(Contact Person)		•	
The Permenter Law Firm	, P.A.			
	(Firm/Company)		•	
2201 S.E. 30th Avenue, S	Suite 202			
	(Address)		•	
Ocala, Florida 34471				
(0	City, State and Zip Code)		•	
Tommy@Permenterlaw.c	com			
E-mail Address: (to be	e used for future annual rep	ort notifications)	•	
For further information	on concerning this mat	ter, please call:		
Tommy D. Permenter, Jr.	., Esquire	at (352) 622-18	311
(Name of Contac	ct Person)		(Dayt	ime Telephone Number)
Enclosed is a check for	or the following amou	nt:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cop		□\$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

INHS11 (06/15)



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2016

TOMMY D. PERMENTER, JR., ESQUIRE 2201 S.E. 30TH AVENUE SUITE 202 OCALA, FL 34471

SUBJECT: OCALA PUBLICATIONS, LLC

Ref. Number: W16000014130

We have received your document for OCALA PUBLICATIONS, LLC and your check(s) totaling \$180.00. 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 the corrected original and one copy of 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 816A00003949

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 B Ocala Publications, Inc.	Business Entity" immediately prior to the filing of the Articles o	of Conversion is:
	(Enter Name of Other Business Entity) P900061591	
2. The "Other Business Entit	ty" is a Corporation	
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or inc	corporated under the laws of Florida	
on July 29, 1999 (date of organization, formation)	(Enter state on if a new II.C. entity, the new	ne of the country)
(date of organization, formatio	on or incorporation)	
3. The name of the Florida L	Limited Liability Company as set forth in the attached Articles	of Organization:
Ocala Publications, LLC		
(Enter	r Name of Florida Limited Liability Company)	
4. If not effective on the date	e of filing, enter the effective date:	
date this document is filed b	not be prior to date of receipt or filed date nor more than 90 by the Florida Department of State; <u>AND</u> 2) must be the sai	me as the effective
	Articles of Organization, if an effective date is listed therein. lock does not meet the applicable statutory filing requirements, this date will be partment of State's records.	
5. The plan of conversion has	c been approved in accordance with all applicable statutes	

Page 1 of 2

Signed this 11th day of February	20 <u>.16</u>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: <u> </u>	Tille: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Kathy Johnson Printed Name: Kathy Johnson	Title: President
Signature:Printed Name:	
Signature:Printed Name:	
Signature:	
Printed Name:	Title:
Signature: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 In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili 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: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

Page 2 of 2

FLORIDA LIMITED LI	ABILITY COMPANY
	FILED
	c mr 3 58
	16 HAR -8 PH 3.58
	MODERATE STATE
ity Company, "L.L.C.," or "LLC.")	
rincipal office of the Limite	ed Liability Company is:
Mailing Address:	
1007 E. Fort King Street	
Ocala, Florida 34471	
l Office, & Registered Ag tered Agent. You must designate an	
registered agent are:	
2	
. Box NOT acceptable)	
FL 34471	
Zip	
	ity Company. "L.L.C.," or "LLC.") incipal office of the Limite Mailing Address: 1007 E. Fort King Street Ocala, Florida 34471 I Office, & Registered Agered Agent. You must designate and registered agent are: Box NOT acceptable) FL 34471

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

<u>Title:</u>	Name and Address:	
$\overline{\text{"AMBR"}}$ = Authorized Member	· · · · · · · · · · · · · · · · · · ·	
"MGR" = Manager		
MGR	Kathy Johnson	
	908 S.E. 16th Street	
	Ocala, Florida 34471	
		···.
(Use attachment if necessary) CLE V: Effective date, if other than the	e date of filing:	(OPTIONA
CLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.) If the date inserted in this block does not meet	be specific and cannot be more than f the applicable statutory filing requirements, this	ive business d
CLE V: Effective date, if other than the effective date is listed, the date must 00 days after the date of filing.) If the date inserted in this block does not meet	be specific and cannot be more than f the applicable statutory filing requirements, this	ive business d
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CLE V: Effective date, if other than the effective date is listed, the date must 00 days after the date of filing.) If the date inserted in this block does not meet ent's effective date on the Department of State. CLE VI: Other provisions, if any.	the applicable statutory filing requirements, this is records.	date will not be
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Page 2 of 2

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