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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
 (Bu	ısiness Entity Naı	m e) .
(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT. Liners 110
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Star M. Sansone (Contact Person)
Salter Feiber, P.A. (Firm/Company)
3940 NW 16th Blvd, Blclg. B
Cancerille, FL 32605 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Star M. Sansurc at (352) 376.8201 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\mathbb{X}\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\mathbb{X}\$155.00 Filing Fees and Certificate of Status \$\mathbb{X}\$185.00 Filing Fees and Certified Copy (\$\mathbb{C}\$) Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

Salter - Feiber

3940 NW 16th Boulevard, Bldg. B Gainesville, Florida 32605

P.O. Box 357399 Gainesville, Florida 32635

T: 352.376.8201 **F:** 352.376.7996 www.salterlaw.net

STAR M. SANSONE LL.M in Taxation stars@salterlaw.net

March 9, 2016

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

Re: Articles of Conversion and Articles of Organization for Liners, LLC

Dear Sir or Madam:

Enclosed please find the Articles of Conversion and Articles of Organization for Liners, LLC, along with our firm check in the amount of \$150.00 for the filing fees. Once filed, please forward the documents to our office.

Sincerely,

Stak-M. Sansone

SMS:mh

ce: Kevin Hansen

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 Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Florida
on 11/15/2000 (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:
Liners, LLC
Lincrs, LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (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.

Page 1 of 2

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

Signed this 8 day of March	20 16.
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative. Printed Name: Karin Hansen	Title:
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Hansen Printed Name: Kevin Hansen	Title: President
Signature: Printed Name:	Title:
Signature:Printed Name:	
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 Liability Signature of one General Partner.	ty Partnership:
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
•	
Lines, LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
110320 NIVI 27th Drive	P.O. Rox 23(7)
16320 NW 37 ^m Drive Ganaville FL 32609	P.O. BOX 230 La Crosse, FL 37658
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Kevin m. Han	Sen.
<u>Kevin M. Han</u> Name	2
16320 N.W. 3- Florida street address (P.O.	Box NOT accentable)
	_
<u>Ganaville</u> City	FL 32609
City	Zıp
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S
- Cl	
Registered Agent's Sign	ature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized	Name and Address: Member
"MGR" = Manager 	Kevin Hansen 16320 NW 37th Dive Gamaville Fl 32653 32609
·····	
•	
	<u> </u>
(Use attachment if necession is a least of the control of the cont	
ICLE V: Effective date, in effective date is listed, to 90 days after the date of If the date inserted in this blochent's effective date on the Dep	f other than the date of filing: (OPTIONAL) he date must be specific and cannot be more than five business days filing.) k does not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
ICLE V: Effective date, in effective date is listed, to 90 days after the date of If the date inserted in this blochent's effective date on the Department. Other provision	f other than the date of filing: (OPTIONAL) he date must be specific and cannot be more than five business days filing.) k does not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
ICLE V: Effective date, in effective date is listed, to 90 days after the date of If the date inserted in this blochent's effective date on the Deput CLE VI: Other provision	f other than the date of filing: (OPTIONAL) he date must be specific and cannot be more than five business days ifiling.) k does not meet the applicable statutory filing requirements, this date will not be listed artment of State's records. s, if any.

ARTICLE IV-

Filing Fees
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

M. Hansen
Typed or printed name of signee

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