

L16000119232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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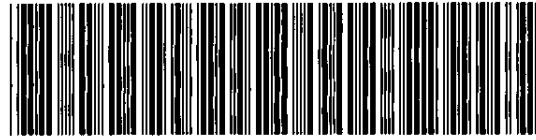
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Wolters Kluwer
Corporate Legal Services

515 East Park Avenue Tallahassee, FL, 32301

850-205-8842

TERRANOVA SOLUTIONS, INC.

Thank you!

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	CONVERSION
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

6/24/2016
CB

Order#:
Biz-Filings

Ref#: _____

Amount: \$ _____
Check
Attached

(COPY)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TERRANOVA SOLUTIONS, LLC
(Name of Resulting Florida Limited Company)

The enclosed Certificate 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:

Jessica Marschke

(Contact Person)

Business Filings Incorporated

(Firm/Company)

8020 Excelsior Dr., Suite 200

(Address)

Madison, WI 53717

(City, State and Zip Code)

fulfillment@bizfilings.com

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

For further information concerning this matter, please call:

Jessica Marschke at (800) 9817183
(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

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

FILED
16 JUN 24 PM 2: 24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Certificate 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 this Certificate of Conversion is:
TERRANOVA SOLUTIONS, INC P07-26660

(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 02/26/2007 (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**:
TERRANOVA SOLUTIONS, LLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: July 1, 2016.
(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.)

5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Signed this 22nd day of June 20 16.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: D. Barboza
Printed Name: Dean R Barboza Title: Member

Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: D. Barboza
Printed Name: Dean R Barboza Title: President

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of **ALL** General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

**ARTICLES OF ORGANIZATION
OF
TERRANOVA SOLUTIONS, LLC**

FILED
16 JUN 24 PM 2: 24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the limited liability company is: TERRANOVA SOLUTIONS, LLC

ARTICLE II ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be: 13506 Summerport Village Pkwy, Suite 149, Windermere, FL 34786.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

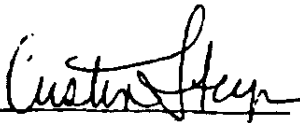
The name and address of the registered agent are: Cristin Steyn, 11402 Buckley Wood Ct, Windermere, FL 34786. Located in the County of Orange.

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.

ARTICLE IV DELAYED EFFECTIVE DATE

The delayed effective date of the Limited Liability Company is: 7/1/2016

Signature: _____



Date: 6/22/2016

Cristin Steyn

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the members and the names and addresses of the members are:

Nichole Bennet, 5490 McGinnis Village Pl, Suite 104, Alpharetta, GA 30005
Dean R Barboza, 11110 W Oakland Park Blvd, 257, Sunrise, Florida 33323
Andre Campbell, 23688 E Bellewood Drive, Aurora, CO 80016
Cristin Steyn, 11402 Buckley Wood Ct, Windermere, FL 34786

ARTICLE V DURATION

The duration for the limited liability company shall be: Perpetual.


Dean R. Barboza, Organizer

Date: 6/22/2014

Authorized Representative

(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.)

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