L1600171770

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE TALL AND SOUTH OF THE STATE OF STATE OF STATE OF THE STATE OF TH

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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 17, 2016

KEN JOHNSON P.O. BOX 578 MARCO ISLAND, FL 34146

SUBJECT: SUMMIT EQUIPMENT OUTLET, LLC

Ref. Number: W16000057316

We have received your document for SUMMIT EQUIPMENT OUTLET, 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):

You failed to make the correction(s) requested in our previous letter.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Matthew T Moon Regulatory Specialist II

Letter Number: 716A00017460

www.sunbiz.org

Division of Compositions D.O. POV 6297 Tellahages Florida 2021

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FLORIDA DEPARTMENT OF STATE Division of Corporations

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ALL SOLL MALL LUNGA

July 21, 2016

KEN JOHNSON P.O. BOX 578 MARCO ISLAND, FL 34146

SUBJECT: SUMMIT EQUIPMENT OUTLET, LLC

Ref. Number: W16000050846

TALLY SEED PHIG: 19

We have received your document for SUMMIT EQUIPMENT OUTLET, 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):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Only one set of article is required to be filed.

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.

Matthew T Moon Regulatory Specialist II

Letter Number: 516A00015304

COVER LETTER

TO:	Registration S Division of C						
SUBJ	IECT: Summit E	Equipment Outlet, LLC					
		(Name	of Resulting Florida I	Jimite	d Company)		
					d fees are submitted to convectordance with s. 605.1045, l		ther
Please	e return all corre	espondence concernin	g this matter to:				
Ken Jo	ohnson						
		(Contact Person)					
Summ	it Equipment Outle	et, LLC					**
		(Firm/Company)				e e	79 (
PO Bo	ox 578					AUG	171
		(Address)				<u>ა</u>	1/1
Marco	Island, FL 34146					29	
	((City, State and Zip Code)				PN 10:	
kj@su	mmit-equipment-c	outlet.com				9	SRIDA
E-1	nail Address: (to b	e used for future annual re	port notifications)				Þ
For fu	ırther informati	on concerning this ma	tter, please call:				
Ken Jo	ohnson		_at ()	513-4	14 01		
	(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)		
Enclo	sed is a check f	or the following amou	ınt:				
(\$25 fc & \$12;	60.00 Filing Fees or Conversion 5 for Articles anization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing F and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Regis Divisi Clifto 2661	EET ADDRESS tration Section ion of Corporation on Building Executive Center nassee, FL 3230	ions er Circle	Registra Division P. O. Bo	tion S of C ox 632	Corporations		

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

SECROTARY OF STATE AND A 16 AUG 30 PH In: 19

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
The "Other Business Entity" is a LLC
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
rirst organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Summit Equipment Outlet, LLC
(Enter Name of Florida Limited Liability Company)
If not effective on the date of filing, enter the effective date: 07/08/16 The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the late this document is filed by the Florida Department of State; AND 2) must be the same as the effective late listed in the attached Articles of Organization, if an effective date is listed therein.)
lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ocument's effective date on the Department of State's records.

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

Signed this 8 day of July	20_16
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Ken Johnson	Title: President
(Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Signature: Printed Name: Signature: Signatur	_Title: Prosident
Signature:	
Printed Name:	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
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 Liabili Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	
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 1 - Name:

The name of the Limited Liability Company is:

Summit Equipment Outlet, LLC	· · · · · · · · · · · · · · · · · · ·	
(Must end with the words "Limited Liabil	ity Company, "L.L.C" or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the pr	rincipal office of the Limited 1	Liability Company is:
Principal Office Address:	Mailing Address:	
TO BURSON 910 Sycamore CT	PO Box 578	
Marco Island, FL	Marco Island, FL	
34145	34146	·····
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	tered Agent. You must designate an ind	ividual or another SEC SALE SALE SALE SEC SALE SEC SALE SEC SALE SEC SALE SEC SALE SALE SALE SALE SALE SALE SALE SALE
		ය ****
Ken Johnson		O 127≡ ***m
Name	2	10: SE
910 Sycamore Ct.		
Florida street address (P.O	. Box <u>NOT</u> acceptable)	₩ DM
Marco Island	FL 34145	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete paccept the obligations of my position as registered Agent's Sign	this certificate, I hereby acceptity. I further agree to comply voerformance of my duties, and gistered agent as provided for	ot the appointment as with the provisions of all I am familiar with and

(CONTINUED)

	<u>Title:</u> "AMBR" = Authorized M	Name and Address:	
	"MGR" = Manager MGR President	Dina Johnson 10 Box 578 9/0 Sycamore Ct. Marco Island, FL 34146 Ken Johnson	
		Marco Island, FL 34/45	ASE SE
			SSCELCION
	(Use attachment if necessar	ary)	Dm >
(If an to or 9 Note: I docume	effective date is listed, the O days after the date of fili	oes not meet the applicable statutory filing requirements, this date will not be list nent of State's records.	s prior
(If an to or 9 Note: I docume	effective date is listed, the 0 days after the date of filing fithe date inserted in this block dunt's effective date on the Department.	date must be specific and cannot be more than five business day ng.) oes not meet the applicable statutory filing requirements, this date will not be listed nent of State's records. f any.	s prior
(If an to or 9 Note: I docume	effective date is listed, the 00 days after the date of filing the date inserted in this block dont's effective date on the Departraction of the Departman of the Depar	date must be specific and cannot be more than five business day ng.) oes not meet the applicable statutory filing requirements, this date will not be listed nent of State's records. f any.	s prior

ARTICLE IV-

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)
Page 2 of 2

Typed or printed name of signee Filing Fees