## L1000175184

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





200290380882

16 SEP 20 PH 2: 01

16 SP 20 FF 3



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 296992 4809065

AUTHORIZATION

COST LIMIT : \$150.00 ma

ORDER DATE: September 20, 2016

ORDER TIME : 12:56 PM

ORDER NO. : 296992-055

CUSTOMER NO: 4809065

## DOMESTIC AMENDMENT FILING

NAME: NED STEVENS GUTTER CLEANING &

GENERAL CONTRACTING OF

FLORIDA, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS:

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Ned Stevens Gutter Cleaning &	General Contracting of Florida, LLC	
(Nat	me of Resulting Florida Limited Company)	<b></b>
	rticles of Organization, and fees are submitted to a Liability Company" in accordance with s. 605.1	
Please return all correspondence concern	ning this matter to:	
Christopher S. Davidson		
(Contact Person)		
Venable LLP		
(Firm/Company)		•
750 E. Pratt Street, Suite 900	,	
(Address)		
Baltimore, MD 21202		
(City, State and Zip Cod	e)	
·		
E-mail Address: (to be used for future annua	l report notifications)	
For further information concerning this	matter, please call:	
	at () (Area Code) (Daytime Telephone Number)	_
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following am	aount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\begin{array}{c} \$155.00 \text{ Filing Fee} \\ and \text{ Certificate of Status} \\ \text{Status} \\ \text{Status} \\ \text{The conversion of Organization} \\ \text{Status} \\ \text{The conversion of Organization} \\ The conversion of Orga	and Certified Copy  S180.00 Filing Fees, Certified Copy, and Certificate of Status	p + <b>6</b>
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	SP 20 F 3 2

INHS11 (06/15)

Articles of Conversion
For
"Other Business Entity"

Into

Florida Limited Liability Company

16 SEP 20 FF 3-25

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.

37-4 Gt C-44 Ol	ity" immediately prior to the filing of the Articles of Conversion is:
(Enter Nan	ne of Other Business Entity) P0700051076
2. The "Other Business Entity" is a	oration
	r entity type. Example: corporation, limited partnership, eneral partnership, common law or business trust, etc.)
First organized, formed or incorporated t	under the laws of Florida
05/11/2007	(Enter state, or it a non-U.S. entity, the name of the country)
(date of organization, formation or incorpora	tion)
3. The name of the Florida Limited Liab	oility Company as set forth in the attached Articles of Organization:
Ned Stevens Gutter Cleaning & General Contract	ting of Florida, LLC
(Enter Name of Flor	rida Limited Liability Company)
4. If not effective on the date of filing, e	nter the effective date:
	to date of receipt or filed date nor more than 90 days after the
	ida Department of State; <u>AND</u> 2) must be the same as the effective Organization, if an effective date is listed therein.)
	neet the applicable statutory filing requirements, this date will not be listed as the
5 The also of conversion has been conve	aved in accordance with all applicable statutes

Page 1 of 2

Signed this day of September	20_16	
Signature of Authorized Representative	e of Limited Liability Company:	
Signature of Authorized Representative: Printed Name: Michael R. Stevens	Michel H. Title: President of Sole Memb	oer
Signature(s) on behalf of Other Business	Entity: [See below for required sign	nature(s)]
Signature: Airbul ## Printed Name: Michael R. Stevens	Title: President	
Signature: Printed Name:		<del></del>
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	·	
Signature: Printed Name:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected If Florida General Partnership or Limite	ted, an Incorporator must sign.	
Signature of one General Partner.  If Florida Limited Partnership or Limite Signatures of ALL General Partners.	d Liability Limited Partnership:	
All others: Signature of an authorized person.	•	
Fees:		
Articles of Conversion: Fees for Florida Articles of Organ Certified Copy: Certificate of Status:	\$25.00 ization: \$125.00 \$30.00 (Optional) \$5.00 (Optional)	16 SEP <b>26</b>
•	Page 2 of 2	· · · · · · · · · · · · · · · · · · ·

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1 1

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		16	SEP	20	P[]
The name of the Limited Liability Company is:		· ·	, i		
Ned Stevens Gutter Cleaning & General Contracting of F	lorida, LLC				
(Must end with the words "Limited Liabili			-		
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liab	ility (	Comp	any is	s:
Principal Office Address:	Mailing Address:				
11 Daniel Road East	11 Daniel Road East				
Fairfield, NJ 07004	Fairfield, NJ 07004		-		
·			-		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)  The name and the Florida street address of the re  Corporation Service Company	ered Agent. You must designate an individue	l or and	other		
Name					
1201 Havin Sharet					
1201 Hays Street Florida street address (P.O.	Box NOT acceptable)				
X 10.1100 000 000 (X 10.1					
Tallahassee	FL 32301				
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 capact statutes relating to the proper and complete p accept the obligations of my position as reg	this certificate, I hereby accept the ity. I further agree to comply with performance of my duties, and I am	e appo the pi fami	ointme ovisie liar w	ent as ons of ith ar	all
Registered Agent's Sign	Melissa Asst. Vice			1t	

(CONTINUED)

Page 1 of 2

ARTICLE IV-		1-	ILED	
The name and address of each pers Company:	son authorized to manage and contri	ol the Limited Lia	bility 20 P	3. 2
Title: "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager AMBR	NSGC of Florida, Inc.			
THE	11 Daniel Road East	<del></del>		
•	Fairfield, NJ 07004			
	•			
		<u> </u>		
•				
(Use attachment if necessary)  CLE V: Effective date, if other than effective date is listed, the date must day after the date of filing.)  If the date inserted in this block does not me	st be specific and cannot be more	than five busines	s days pr	
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