

L16000233003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

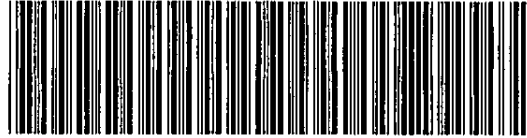
Special Instructions to Filing Officer:

Office Use Only

W16000233003

DEC 29 2016

T. SCOTT



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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 DEC 28 AM 10:48



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 9, 2016

GLADYS LACEN  
P.O. BOX 740343  
ORANGE CITY, FL 32774

SUBJECT: TJB AUTOGLASS LLC  
Ref. Number: W16000082389

We have received your document for TJB AUTOGLASS 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):

Page 1 of conversion must be completed.,

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.

Tyrone Scott  
Regulatory Specialist II

Letter Number: 316A00026209

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TJB Autoglass  
(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:

Gladys Lacer  
(Contact Person)

TJB Autoglass  
(Firm/Company)

P.O. Box 740343  
(Address)

Orange City, Florida, 32774  
(City, State and Zip Code)

TJB Autoglass@gmail.com  
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Leonardo Chandler at ( 386 ) 320-1298  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	<input type="checkbox"/> \$155.00 Filing Fees and Certificate of Status	<input type="checkbox"/> \$180.00 Filing Fees and Certified Copy	<input type="checkbox"/> \$185.00 Filing Fees, Certified Copy, and Certificate of Status
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**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

11/17/2016 12:11:02 PM -0500 IRS

PAGE 2 OF 2



**Department of the Treasury  
Internal Revenue Service  
Ogden, UT 84201**

In reply refer to: 0441976004  
Nov 17, 2016 LTR 147C  
47-1848995

**TJB AUTOGLASS  
GLADYS LACEN SOLE MBR  
PO BOX 740343  
ORANGE CITY FL 32774**

**Taxpayer Identification Number: 47-1848995**

**Form(s):**

**Dear Taxpayer:**

**Thank you for your telephone inquiry of November 17th, 2016.**

**Your Employer Identification Number (EIN) is 47-1848995. Please keep this letter in your permanent records. Enter your name and your EIN on all business federal tax forms and on related correspondence.**

**If you have any questions regarding this letter, please call our Customer Service Department at 1-800-829-0115 between the hours of 7:00 AM and 7:00 PM. If you prefer, you may write to us at the address shown at the top of the first page of this letter. When you write, please include a telephone number where you may be reached and the best time to call.**

**Sincerely,**

**Ms. Hilkey  
1000144069  
Customer Service Representative**

**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:  
TJB Autoglass Corp. - 01600076840  
(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Sole MBR LLC.  
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of United States of America  
(Enter state, or if a non-U.S. entity, the name of the country)  
on September 15, 2016.  
(date of organization, formation or incorporation) Florida

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
TJB Autoglass LLC  
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: November 30th, 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.)

**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.

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

16 DEC 28 AM 10:40  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
1946

Signed this 5<sup>th</sup> day of December 20 16.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: [Signature]  
Printed Name: Leonardo Chandler Title: CEO

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

Signature: [Signature]  
Printed Name: Gladys Lacen Title: owner

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 FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

TJBAutoglass LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

723 Morrissey Drive  
Unit #10320  
Orange City, FL 32763

#### Mailing Address:

P.O. Box 740343  
Orange City, FL 32774

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Leonardo Chandler  
Name

723 Morrissey Dr. Unit #10320  
Florida street address (P.O. Box NOT acceptable)

Orange City FL 32763  
City Zip

*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)

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 DEC 28 AM 10:40

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

AMBR

**Name and Address:**

Gladys Lacer  
723 Morrissey Drive #10320  
Orange City, FL 32763

Leonardo Chandler  
723 Morrissey Dr. unit #10320  
Orange City, FL 32763

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: November 29th 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

Gladys Lacer  
Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

Gladys Lacer

Typed or printed name of signee

**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)