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Ref#

## 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724 850-508<sub>7</sub>1891 (cell)

Community Services Group, LLC

10303485 Date: Name: Document #: Order #: Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Apostille/Notarial Country of Destination: Certification: Number of Certs: Filing: Certified: Plain: COGS: Availability \_\_\_\_\_ Amount: \$ \OO. OO Document \_\_\_\_\_ Examiner \_\_\_\_\_ Updater \_\_\_\_\_

Thank you!

## 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.

Statutos.	
I. The name of the "Other I COMMUNITY SERVICES GRO	Business Entity" immediately prior to the filing of the Articles of Conversion is:
	(Enter Name of Other Business Entity)
2. The "Other Business Ent	ity" is a LLC
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or it	ncorporated under the laws of NV
on 12/20/2010	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, format	on or incorporation)
3. The name of the Florida	Limited Liability Company as set forth in the attached Articles of Organization:
COMMUNITY SERVICES GR	pur, i.i.c
(En	er Name of Florida Limited Liability Company)
4. If not effective on the de	te of filing, enter the effective date:
(The effective date; 1) car date this document is filed date listed in the attached	not be prior to date of receipt or filed date nor more than 90 days after the by the Florida Department of State; AND 2) must be the same as the effective Articles of Organization, if an effective date is listed therein.) block does not meet the applicable statutory filing requirements, this date will not be listed as the
5. The plan of conversion h	as been approved in accordance with all applicable statutes.
^	Page 1 of 2



Signed this 22 day of Dec	20 / 4		
Signature of Authorized Representative of Limit			
Signature of Authorized Representative: Printed Name: NIAWE FUTCH	Tille MEMBER		
Signature(s) on behalf of Other Business Entity:	<del></del>		
Signatura: Dear Futal			
Printed Name: Plane Foralt	Title: MEMBER		
Signature:	_ Title:		
,		•	
Signature:	Title:		
	•		
Signature: Printed Name:	Title:	•	
Signature:	Tisla		
Signature: Printed Name:	Title	•	
Timod Name.	Title:		
If Florida Cornoration: Signature of Chairman, Vice Chairman, Director, or			
If Directors or Officers have not been selected, an Inc	corporator must sign.	FEE 5	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnershin:	755 730 930	
		27 1533 1533	Г
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnershin:	- PPH <b>- P</b>	ED
All others: Signature of an authorized person;		1 12: 53 1031E	
Foes:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

Page 2 of 2

ARTICLESO	FORGANIZATION FO	OR FLORIDA LIMITED LIABILITY CO	JMPANY
ARTICLE I - Na	me		
The name of the L	imited Liability Compan	ıy is:	•
	VICES GROUP, LLC	Liability Company, "L.L.C.," or "LLC,")	
(V	iust chu with the words Limited	Catomay Company, E.E.C., or ELC.	
ARTICLE II - A		sha mula di angan angan angan Timigan di Jabilika Ca	
The maining addre	ess and street address of t	the principal office of the Limited Liability Co	ompany is:
Principal Office	Address:	Mailing Address:	
3874 NOVAL	ine live s.	3874 NOVALINE LAWES	•
JACKSON UPL	47 PIA 32177	JACKSONVILLE FIR 3227	7
(The Limited Liability Countries entity with an	Company cannot serve as its own a serive Florida registration.)	stered Office, & Registered Agent's Signature Registered Agent. You must designate an individual of unot fithe registered agent are:	FILE PEC 27
	DRAI Services	s,Inc. 强烈	골 그
	•	1,0110	.: .:
	1200 South	Pine Island Road	ီ တ
	Florida street address	(P.O. Box NOT acceptable)	
	Plantation	Fr. 33324 ' '	·
	City	Zip	
77		and to seems and a surface of an about a large	-e-e-al Huster-
		and to accept service of process for the above s ited in this certificate, I hereby accept the appo	
unminion of many	م وأولاء بدار فريم ما مستحم المسم	controller I finished access to commit with the new	auteiane of a

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 603, F.S.

> Karen Fugelsung Asst. Socretan Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

Page 1 of 2

ARTICLE IV	
The name and address of each personners.	son authorized to manage and control the Limited Liability
Company:	•
Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
. ,	
100 0 1	
MAWAGER	THOMAS M. FUTCH
	3874 NOVALING LANK S.
	JAX FIA 32274
AMBR	DIAWE FUTCH
777070	3874 NOVA-INE LAWE S.
	77X FIA. 32277
· · ;	
:	
l l	
(Use attachment if necessary)	
TICLE V: Effective date, if other than an effective date is listed, the date must be days after the date of filing.)	est the applicable statutory filing requirements, this date will not be listed
TICLE V: Effective date, if other than an effective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not me iment's effective date on the Department of States.	est be specific and cannot be more than five business days post the applicable statutory filing requirements, this date will not be listed ate's records.
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