

L17000012119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

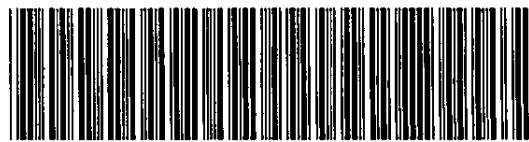
(Business Entity Name)

(Document Number)

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

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01/12/17--01019--003    \*\*150.00

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FLORIDA  
STATE  
MAY 2017  
TALLAHASSEE, FLORIDA

FILED

17 JAN 20 AM 1:11

T. BURCH  
JAN 20 2017

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ambassador Cleaners of Lake County LLC  
(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:

Rob Kennedy

(Contact Person)

Ambassador Cleaners of Lake County LLC

(Firm/Company)

11440 Mattiota Rd.

(Address)

Groveland, Fl. 34736

(City, State and Zip Code)

rob@onsitecleaningfl.com

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

For further information concerning this matter, please call:

Rob Kennedy

(Name of Contact Person)

at (352) 267-8081

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

\$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



**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

January 13, 2017

ROB KENNEDY  
11440 MATTIOLA RD  
GROVELAND, FL 34736

**SUBJECT: AMBASSADOR CLEANERS OF LAKE COUNTY, LLC**  
Ref. Number: W17000003399

We have received your document for AMBASSADOR CLEANERS OF LAKE COUNTY, 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Tim Burch  
Regulatory Specialist III

Letter Number: 117A00000850

17 JAN 20 AM 1:11  
RECEIPT OF STATE  
TALLAHASSEE, FLORIDA  
FILED

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:

Ambassador Cleaners of Lake County Inc.

(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

(Enter state, or if a non-U.S. entity, the name of the country)

on May 17, 1993

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Ambassador Cleaners of Lake County LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: 1-10-17

(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.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 10<sup>th</sup> day of January 2017.

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

Signature of Authorized Representative: RAK  
Printed Name: Robert Kennedy III Title: Authorized Member, President

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

Signature: RAK Printed Name: Robert Kennedy Title: President

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)

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FLORIDA SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Ambassador Cleaners OF Lake County 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:

11440 Mattiolla Rd.  
Groveland, FL 34736

Mailing Address:

11440 Mattiolla Rd.  
Groveland, FL 34736

## 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:

Robert Kennedy

Name

11440 Mattiolla Rd.

Florida street address (P.O. Box NOT acceptable)

Groveland

FL 34736

City

Zip

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*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)

**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

**Name and Address:**

*Robert Kennedy III*  
*11440 Mattilda Rd.*  
*Groveland, FL 34736*

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 1-10-17 (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:**

**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.

Robert Kennedy

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)**

17 JAN 2017 AM 1:  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA  
FILED