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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

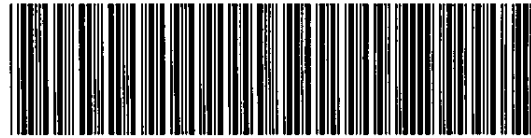
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FILED
17 JAN -4 AM 8 50
RECEIVED
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRI-CITY DIVERSIFIED SERVICES, 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:

W. DENIS SHELLEY, ESQ.

(Contact Person)

LEGACY LAW ASSOCIATES, P.L.

(Firm/Company)

313 South Palmetto Ave.

(Address)

Daytona Beach, Florida 32114

(City, State and Zip Code)

shelley@legacylaw313.com

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

For further information concerning this matter, please call:

Denis Shelley at **(386) 252-2531**

(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

\$150.00 Filing Fees (\$25 for Conversion and \$125 for Articles)

STREET ADDRESS: MAILING ADDRESS:

Registration Section Registration Section

Division of Corporations Division of Corporations

Clifton Building P. O. Box 6327

2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED
17 JAN -4 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 5, 2017

W. DENIS SHELLEY, ESQ.
313 SOUTH PALMETTO AVE.
DAYTONA BEACH, FL 32114

SUBJECT: TRI-CITY DIVERSIFIED SERVICES, LLC
Ref. Number: W17000000930

We have received your document for TRI-CITY DIVERSIFIED SERVICES, 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 the corrected original and one copy of 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. O

Nadira D McClees-Sams
Regulatory Specialist II
New Filing Section

Letter Number: 917A00000282

ARTICLES OF CONVERSION
FOR
"TRI-CITY DIVERSIFIED SERVICES, INC."
INTO
FLORIDA LIMITED LIABILITY COMPANY

FILED
17 JAN -4 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 Section 605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:

TRI-CITY DIVERSIFIED SERVICES, INC.

2. TRI-CITY DIVERSIFIED SERVICES, INC. (the "Other Business Entity") is a **FLORIDA CORPORATION**, first organized, formed or incorporated under the laws of **FLORIDA** on 03/26/1985.

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

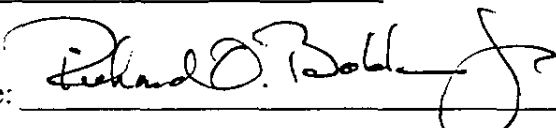
TRI-CITY DIVERSIFIED SERVICES, LLC

4. The effective date is January 1, 2017.

5. The plan of conversion has been approved in accordance with Sections 607.1112 thru 607.1114 and 605.1041-605.1046, Florida Statutes.

Signed this 16 day of December, 2016 .

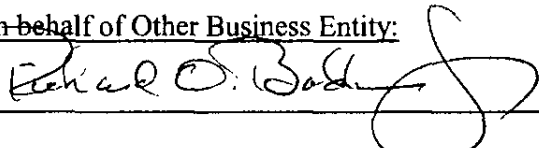
Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: 

Printed Name: RICHARD O. BALDWIN, JR.

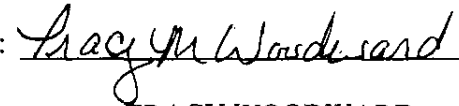
Title: MANAGER

Signature(s) on behalf of Other Business Entity:

Signature : 


Printed Name: RICHARD O. BALDWIN, JR.

Title: President/Director

Signature : 

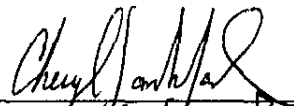
Printed Name: TRACY WOODWARD

Title: Vice-Pres/Director

Signature : 

Printed Name: LARRY LANKFORD

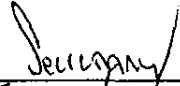
Title: Treasurer/Director

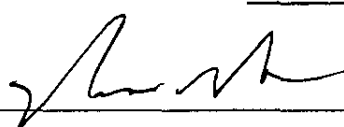
Signature : 

CHERYL LANKFORD

Printed Name: _____

Title: _____


Secretary / Director

Signature : 

Printed Name: NORMAN BLACK

Title: Director

**ARTICLES OF ORGANIZATION FOR
TRI-CITY DIVERSIFIED SERVICES, LLC**
A Florida Limited Liability Company

ARTICLE I - Name:

The name of the Limited Liability Company is: **TRI-CITY DIVERSIFIED SERVICES, LLC.**

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: **3713 Old DeLand Road, Daytona Beach, Fl. 32124.**

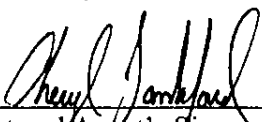
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Name: **CHERYL LANKFORD**

Address: **3713 Old DeLand Road, Daytona Beach, Fl. 32124**

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)

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

Title: Manager

Name : **RICHARD O. BALDWIN, JR.**

Address: **3713 Old DeLand Road, Daytona Beach, Fl. 32124**

Title: Assistant Manager

Name : **TRACY WOODWARD**

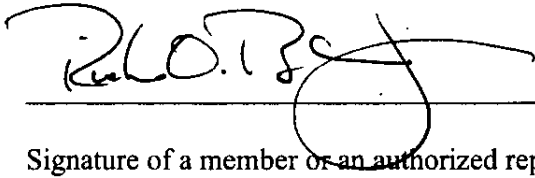
Address: **167 Ridgewood Ave., Holly Hill, Florida 32117**

ARTICLE V: Effective date, if other than the date of filing: .

The effective date is January 1, 2017.

(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.)

REQUIRED SIGNATURE:

A handwritten signature in black ink, appearing to read "R.O. Baldwin, Jr.", written over a horizontal line.

Print Name: RICHARD O. BALDWIN, JR.

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

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)