117000032129

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

N. SAMS FEB 1 4 2017



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COVER LETTER

Division of C					
SUBJECT: Ameri-Pr	o Purchasing, LLC				
	(Name of Re	sulting Florida Limit	ed Con	npany)	
				nd fees are submitted to convert an "O ccordance with s. 605.1045, F.S.	the
Please return all corr	espondence concernin	g this matter to:			
Max Klugman					
	(Contact Person)		•		
Ameri-Pro Purchasing, I	LLC				
	(Firm/Company)		•		
7410 Linden Lane					
	(Address)		-		
Sarasota, FL 34243					
(City, State and Zip Code)		•		
vannickent@aol.com					
E-mail Address: (to b	e used for future annual re	port notifications)	-		
For further informati	on concerning this ma	tter, please call:			
Max Klugman		at (352	318-9	9623	
(Name of Conta	act Person)	(Area Code)	(Day	0623 ytime Telephone Number)	
	for the following amou a bank located in the		roces	sed by this office must be payable in I	JS
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES	S:	MAIL	ING A	ADDRESS:	
New Filing Section		New F			
Division of Corporat	ions	Divisio	n of C	Corporations	
Clifton Building		P. O. B	ox 63	27	

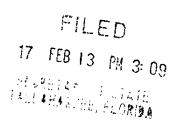
Tallahassee, FL 32314

32301

2661 Executive Center

Circle Tallahassee, FL

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company



The Articles of Conversion <u>and attached Articles of Organization</u> 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 Busines Ameri-Pro Purchasing, Inc.	ss Entity" immediately prior to the filing of the Articles of Conversion is:
	nter Name of Other Business Entity)
2. The "Other Business Entity" is	Corporation a
,	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorpor	rated under the laws of
November 18, 2013	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or in	corporation)
	d Liability Company as set forth in the attached Articles of Organization:
Ameri-Pro Purchasing, LLC	e of Florida Limited Liability Company)
4. If not effective on the date of fit (The effective date: 1) cannot be after the date this document is fit the effective date listed in the att	ling, enter the effective date: prior to date of receipt or filed date nor more than 90 calendar days led by the Florida Department of State; AND 2) must be the same as ached Articles of Organization, if an effective date is listed therein.) ses not meet the applicable statutory filing requirements, this date will not be listed as the
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 thi	s <u>10</u>	day of February		_20 <u>17</u>
Signature	of Autho	rized Representative	of Limit	ed Liability Company:
Signature	of Authori	zed Representative: _		Title: President
Printed Na	me: Max Kl	ugman		Title: President
Signature:	(s) on beha MwL	alf of Other Business I	Entity: {S	See below for required signature(s)
Printed Na	me: Max/Kl	ugman		Title: President
Signature:	Maln	a Klugman		Title: Vice President
Printed Na	me: Dhalma	Klugman J		Title: Vice President
Ciamoburo				
Printed Na	me:			Title:
· · · · · · · · · · · · · · · · · · ·				
Signature:				
Printed Na	me:		<u> </u>	Title:
Signature:				
Printed Na	ıme:			Title:
Signature:				
Printed Na	me:			Title:
Signature		ion: n, Vice Chairman, Dire rs have not been selecte		
		Partnership or Limited eral Partner.	d Liability	y Partnership:
		artnership or Limited eneral Partners.	l Liability	Limited Partnership:
All others Signature		rized person.		
Fees:				
Fe Ce			zation:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ameri-Pro Purchasii	ng, LLC		
(N	Must contain the words "Limited Liab	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - A The mailing addr		principal office of the Limited Liability Compa	ı ny is
Principal Office	Address:	Mailing Address:	
7410 Linden Lane		7410 Linden Lane	
ARTICLE III - (The Limited Liability	Registered Agent, Registe	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another	
(The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Ro an active Florida registration.)	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own Rean active Florida registration.) e Florida street address of the Max Klugman	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own Rean active Florida registration.) e Florida street address of the Max Klugman	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own Registration.) e Florida street address of the Max Klugman Na 7410 Linden Lane	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own Registration.) e Florida street address of the Max Klugman Na 7410 Linden Lane	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:	

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)

Title:	Name and Address:
"AMBR" = Author	ized Member
"MGR" = Manager	•
AMBR	Max Klugman
	7410 Linden Lane
	Sarasota, FL 34243
AMBR	Dhalma Klugman
	7410 Linden Lane
	Sarasota, FL 34243
(Use attachment if	
CICLE V: Effective dan effective date is list r to or 90 calendar dan If the date inserted in this	ate, if other than the date of filing: . (OPTIONAL) ed, the date must be specific and cannot be more than five business day sys after the date of filing.) block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
ricle V: Effective da n effective date is list r to or 90 calendar da If the date inserted in this nent's effective date on the	ate, if other than the date of filing: . (OPTIONAL) ed, the date must be specific and cannot be more than five business day sys after the date of filing.) block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records. isions, if any.
ricle V: Effective day n effective date is list r to or 90 calendar day If the date inserted in this nent's effective date on the ricle VI: Other prov REQUIRED SIGN Signa This docu I am awar	ate, if other than the date of filing: . (OPTIONAL) ed, the date must be specific and cannot be more than five business day sys after the date of filing.) block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records. isions, if any.
ricle V: Effective dan effective date is list r to or 90 calendar da If the date inserted in this nent's effective date on the CICLE VI: Other proversely Signa This docular am awar constitutes	nate, if other than the date of filing:
ricle V: Effective dan effective date is list r to or 90 calendar da If the date inserted in this nent's effective date on the CICLE VI: Other proversely Signa This docular am awar constitutes	nate, if other than the date of filing:

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-