L17000057234

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL MAIL
(Busi	ness Entity Nan	ne)
(Docu	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

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W17418

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T. BURCH MAR 1 5 2017

COVER LETTER

Division of C				
SUBJECT:	C3M So	ervices L	LC	
	(Name of Res	ulting Florida Limited Co	ompany)	
			and fees are submitted to convert an "Caccordance with s. 605.1045, F.S.)ther
Please return all corre	espondence concerning	g this matter to:		
Armèo	J Mid	dleton		
C3M	(Contact Person) Scrvices	LLC		
3152	(Firm/Company) Bow-Fin 1	Jr		
Land DL	(Address) AKES, FL City, State and Zip Code)	. 34639		
cmi	103@qma be used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
Marcella	Middleton	1 at (412) 8	367-8043	
(Name of Conta		(Area Code) (D	eaytime Telephone Number)	
	for the following amou a bank located in the		essed by this office must be payable in	US
\$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 ADDRES New Filing Section Division of Corporat		New Filing	ADDRESS: Section Corporations	

P. O. Box 6327

Tallahassee, FL 32314

32301

Clifton Building

2661 Executive Center

Circle Tallahassee, FL



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 1, 2017

ARMED J MIDDLETON 3152 BOWFIN DR LAND O LAKES, FL 34639

SUBJECT: C & M SERVICES LLC Ref. Number: W17000017418

We have received your document for C & M 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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: 117A00003914

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

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17 MAR IL AM 9: 04

ALLES LEEF FLORER

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Partnership, (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Pennsylvania (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
C3M Inspection Services, LLC (Entel Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 calendar 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 21 day of February	_20_17
Signature of Authorized Representative of Limit	ited Liability Company:
Signature of Authorized Representative:	ed I Muddlelor
Printed Name: Armed J Middlefor	Title: Partner
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
	0.000
Signature: Ilanalla llamel	lu luanuliton
Printed Name: Marcella Magnelli Middlet	on Title: Partner
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
TATE 11 C 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
TOTAL 'IL T' 'ALITA A IN TO SERVICE	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All othorns	
All others: Signature of an authorized person.	
Signature of all authorized person.	
Fees:	
Articles of Conversion:	\$25.00
	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Ontinue)
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
C3M Inspection (Must contain the worlds "Limited Liability	Services LLC. Company, "L.L.C.," or "LLC.)
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
815 Lynda Ln North Versailles, PA 15137	815 Lynda Ln North Versailles, PA 15137
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration. Armed Name 3152 Pour registration.	egistered agent are: Middleton Polymer School Sch
Land Olakes City	FL 34634 Zip
Having heen named as registered agent and to	accent service of process for the above stated limite

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)

<u>Title;</u> "AMBR" = Authorized Memb	Name and Address:
"MGR" = Authorized Memb "MGR" = Manager	Armed J Middleton 3152 Bowfin Dr
	Land O Lakes FL 34639
MGR	Marcella Magnelli Middleton 3152 Bowfin Dr. Land O Lakes FL 34634
	元
	R R
	<u> </u>
(Use attachment if necessary)	than the date of filing: (OPTIONA)
LE V: Effective date, if other ffective date is listed, the date or 90 calendar days after the	te must be specific and cannot be more than five business de date of filing.) not meet the applicable statutory filing requirements, this date will not be list of State's records.
LE V: Effective date, if other ffective date is listed, the date or 90 calendar days after the date inserted in this block does not effective date on the Department	te must be specific and cannot be more than five business de date of filing.) not meet the applicable statutory filing requirements, this date will not be list of State's records.
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LE V: Effective date, if other ffective date is listed, the date or 90 calendar days after the date inserted in this block does not seffective date on the Department of a result. REQUIRED SIGNATURE: Signature of a result is executed an aware that any false.	te must be specific and cannot be more than five business de date of filing.) not meet the applicable statutory filing requirements, this date will not be list of State's records. ny. member or an authorized representative of a member. nuted in accordance with section 605.0203 (1) (b), Florida Statutes. see information submitted in a document to the Department of State