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Office Use Only

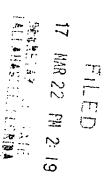
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## **COVER LETTER**

TO: New Filing Ser Division of Co				
SUBJECT: JAND D.C	COYLE, LLC			
Sebule 1.		ulting Florida Limite	d Com	apany)
				d fees are submitted to convert an "Othe coordance with s. 605.1045, F.S.
Please return all corre	spondence concerning	g this matter to:		
JOSEPH COYLE				
	(Contact Person)			
J AND D COYLE, LLC				
	(Firm/Company)			
1721 NATURE CT				
	(Address)	· <u>-</u>		
PALM BEACH GARDEN	NS, FL 33410			
(C	ity, State and Zip Code)			
joe@coyle.ws				
E-mail Address: (to be	used for future annual rej	port notifications)		
For further informatio	n concerning this mat	tter, please call:		
JOSEPH COYLE	-	. 973	. 876-4	478
(Name of Contac	t Person)	_at (	(Day	478 time Telephone Number)
	or the following amou	nt: (All checks pr		eed 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 and Certified Copy		S185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS New Filing Section Division of Corporatio Clifton Building		New Fi	ling S 1 of C	orporations

Tallahassee, FL 32314

32301

2661 Executive Center

Circle Tallahassee, FL

## Articles of Conversion For "Other Business Entity" Into

FILED

17 MAR 22 PM 2: 19

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 Business Entity" immediately prior to the filing of the Articles of Conversion is: J AND D COYLE, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
2. The "Other Business Entity" is a  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of NEW JERSEY
06/18/2004 (Enter state, or it a non-U.S. entity, the name of the country)
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization  J AND D COYLE, LLC
(Enter 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	s day of	
Signature	of Authorized Representative of Lim	ited Liability Company:
	of Authorized Representative:	Title: MANAGING MEMBER
Signature(	s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	me: JOSEPH COYLE	Title: MANAGING MEMBER
Signature:		
Printed Na	me:	Title:
Signature: Printed Na	me:	Title:
Signature: Printed Na	me:	Title:
Signature: Printed Na:	me:	Title:
Signature: Printed Na	me:	
Signature of	Corporation: of Chairman, Vice Chairman, Director, or s or Officers have not been selected, an Ir	
	General Partnership or Limited Liabil of one General Partner.	ity Partnership:
	Limited Partnership or Limited Liabil of ALL General Partners.	ty Limited Partnership:
All others: Signature of	i of an authorized person.	
Fees:		
Fee Ce	ticles of Conversion: es for Florida Articles of Organization: rtified Copy: rtificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR F	LONDA LIVITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	
J AND D COYLE, LLC	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1721 NATURE CT	1721 NATURE CT
PALM BEACH GARDENS, FL 33410	PALM BEACH GARDENS, FL 33410
<u></u>	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
JOSEPH COYLE	
Name	
1721 NATURE CT	
Florida street address (P.O.	Box NOT acceptable)
PALM BEACH GARDENS	FI 33410
City	Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S  ature (REQUIRED)
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**ARTICLE IV-**

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	JOSEPH COYLE	
	1721 NATURE CT	
	PALM BEACH GARDENS, FL 33410	
MGR	DANIEL COYLE	
	865 BEARD AVENUE	
	SEBASTIAN, FL 32958	
(Use attachment if necessary)		
ICLE V: Effective date, if other than effective date is listed, the date me to or 90 calendar days after the dat If the date inserted in this block does not me ent's effective date on the Department of Sta	eet the applicable statutory filing requirements, this date will not be lis	lay
ICLE V: Effective date, if other than effective date is listed, the date my to or 90 calendar days after the dat If the date inserted in this block does not me	ust be specific and cannot be more than five business of the of filing.)  the the applicable statutory filing requirements, this date will not be list	lay
ICLE V: Effective date, if other than a effective date is listed, the date me to or 90 calendar days after the dat. If the date inserted in this block does not me ent's effective date on the Department of Statick VI: Other provisions, if any. AND ALL LAWFUL BUSINESS.  REQUIRED SIGNATURE:  Signature of a mem This document is executed in I am aware that any false info	ust be specific and cannot be more than five business of the of filing.)  bet the applicable statutory filing requirements, this date will not be listate's records.  ber or an authorized representative of a member.  In accordance with section 605.0203 (1) (b), Florida Statutes.  Formation submitted in a document to the Department of State	lay
ICLE V: Effective date, if other than a effective date is listed, the date me to or 90 calendar days after the dat. If the date inserted in this block does not me ent's effective date on the Department of Statick VI: Other provisions, if any. AND ALL LAWFUL BUSINESS.  REQUIRED SIGNATURE:  Signature of a mem This document is executed in I am aware that any false inforconstitutes a third degree felo	ust be specific and cannot be more than five business of the of filing.)  bet the applicable statutory filing requirements, this date will not be listate's records.  Lack  ber or an authorized representative of a member.  n accordance with section 605.0203 (1) (b), Florida Statutes.	lay
CLE V: Effective date, if other than effective date is listed, the date me to or 90 calendar days after the dat. If the date inserted in this block does not me ent's effective date on the Department of State ICLE VI: Other provisions, if any. AND ALL LAWFUL BUSINESS.  REQUIRED SIGNATURE:  Signature of a mem This document is executed in I am aware that any false inforconstitutes a third degree felo.  JOSEPH COYLE	ust be specific and cannot be more than five business of the of filing.)  bet the applicable statutory filing requirements, this date will not be listate's records.  ber or an authorized representative of a member.  In accordance with section 605.0203 (1) (b), Florida Statutes.  Formation submitted in a document to the Department of State	lay

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$30.00 Certified Copy (Optional)
\$5.00 Certificate of Status (Optional)