## L17000079478

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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T. BURCH APR 1 0 2017 TOMMY D. PERMENTER, JR.



Bellwether Professional Park 2201 S.E. 30th Avenue, Suite 202 Ocala, Florida 34471 TELEPHONE
(352) 622-1811
FACSIMILE
(352) 622-1866
EMAIL
TOMMY@PERMENTERLAW.COM

April 3, 2017

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re:

Ocala Heating & Air Conditioning, Inc./LLC

Articles of Conversion

Ladies and Gentlemen:

Enclosed please find the Articles of Conversion for "Other Business Entity" into Florida Limited Liability Company for Ocala Heating & Air Conditioning, Inc., for filing.

Also, enclosed is my firm's check in the amount of \$180.00 representing the filing and certified copy fees.

Thank you for your assistance in this matter. If you have any questions, please let me know.

Sincerely,

THE PERMENTER LAW FIRM, P.A.

Tommy D. Permenter, Jr.

TDP/am Enclosures

## **COVER LETTER**

Division of C	orporations		
SUBJECT: Ocala He	ating & Air Conditioning,	LLC	
50 <b>b</b> 3EC1		of Resulting Florida Limite	ed Company)
			nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:	
Tommy D. Permenter, Jr	Esq.		
	(Contact Person)		
The Permenter Law Firm	ı, P.A.		
-	(Firm/Company)		
2201 S.E. 30th Avenue, 5	Suite 202		
	(Address)		
Ocala, Florida 34471			
((	City, State and Zip Code)		
tommy@permenterlaw.c	om		
E-mail Address: (to b	e used for future annual re	port notifications)	
For further information	on concerning this ma	tter, please call:	
Tommy D. Permenter, Jr	., Esq.	at (352 )622-	1811
(Name of Conta	ct Person)	(Area Code) (Day	ytime Telephone Number)
Enclosed is a check f	or the following amou		
\$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	S:	MAILING A	ADDRESS:
Registration Section		Registration	
Division of Corporati Clifton Building	ons	Division of C P. O. Box 63	
Cirtoii Building 2661 Executive Centi	er Circle	r. U. BOX 03 Tallahassee	

INHS11 (06/15)

Tallahassee, FL 32301

Registration Section

## 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 Busi Ocala Heating & Air Conditioning, Ir	ness 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
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business (rust, etc.)
First organized, formed or incor	porated under the laws of Florida
November 5, 1008	(Enter state, or if a non-U.S. entity, the name of the country)
on (date of organization, formation o	r incorporation)
3. The name of the Florida Lim	ited Liability Company as set forth in the attached Articles of Organization:
Ocala Heating & Air Conditioning, L	LC
(Enter N	ame of Florida Limited Liability Company)
(The effective date: 1) cannot date this document is filed by date listed in the attached Art	be prior to date of receipt or filed date nor more than 90 days after the the Florida Department of State; AND 2) must be the same as the effective icles of Organization, if an effective date is listed therein.)  I does not meet the applicable statutory filing requirements, this date will not be listed as the rtment of State's records.
5. The plan of conversion has be	een annroved in accordance with all annlicable statutes

Signed this 3rd day of April .	20_17
Signature of Authorized Representative of Li	mited Liability Company:
Signature of Authorized Representative:	Title: Manager
Signature(s) on behalf of Other Business Entity	: [See below for required signature(s)]
Signature:	Title: President
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an	or Officer.
If Florida General Partnership or Limited Liab Signature of one General Partner.	oility Partnership:
If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners.	ility Limited Partnership:
All others: Signature of an authorized person.	
Fees:	

Articles of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: \$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "L	mited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street addres	s of the principal office of the Limited Liability Cor	npany
Principal Office Address:	Mailing Address:	
3695 S.E. 58th Avenue	3695 S.E. 58th Avenue	
Ocala, Florida 34480	O 1 El 11 04400	
Ocaia, Florida 34480	Ocala, Florida 34480	
ARTICLE III - Registered Agent, F The Limited Liability Company cannot serve as i	Registered Office, & Registered Agent's Signatur sown Registered Agent. You must designate an individual or another	<b>e:</b> T
ARTICLE III - Registered Agent, F The Limited Liability Company cannot serve as i business entity with an active Florida registration	Registered Office, & Registered Agent's Signatures own Registered Agent. You must designate an individual or another.	ir 17
ARTICLE III - Registered Agent, F The Limited Liability Company cannot serve as i business entity with an active Florida registration The name and the Florida street addre	Registered Office, & Registered Agent's Signatures own Registered Agent. You must designate an individual or another.)  ss of the registered agent are:	FIL 17 APR -5
ARTICLE III - Registered Agent, F The Limited Liability Company cannot serve as i business entity with an active Florida registration The name and the Florida street addre	Registered Office, & Registered Agent's Signatures own Registered Agent. You must designate an individual or another.)  ss of the registered agent are:	= 17 APR -5
ARTICLE III - Registered Agent, If (The Limited Liability Company cannot serve as it business entity with an active Florida registration). The name and the Florida street address Charles V. Chappel	Registered Office, & Registered Agent's Signatures own Registered Agent. You must designate an individual or another.)  ss of the registered agent are:	= 17 APR -5
ARTICLE III - Registered Agent, If (The Limited Liability Company cannot serve as it business entity with an active Florida registration). The name and the Florida street address Charles V. Chappel	Registered Office, & Registered Agent's Signatures own Registered Agent. You must designate an individual or another.)  ss of the registered agent are:	FIL 17 APR -5

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)

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Charles V. Chappel	
	3695 S.E. 58th Avenue	
	Ocala, Florida 34480	
Treasurer, Secretary	Joy L. Chappel	
•	3695 S.E. 58th Avenue	
	Ocala, Florida 34480	
		<u> </u>
		APR 2
	· · · · · · · · · · · · · · · · · · ·	<b>70</b>
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(Use attachment if necessary)	···	367
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LEV: Effective date if other than t	he date of filing:	OPTIONAL)
effective date is listed, the date mu	st be specific and cannot be more than five	
days after the date of filing.)	a appeared and ammot be more than live	zadiii od uaj
	et the applicable statutory filing requirements, this date	will not be list
t's effective date on the Department of Sta		
CLE VI: Other provisions, if any.		

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.

Charles V. Chappel

ARTICLE IV-

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)

Page 2 of 2