

LI Form 105065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200298803152

05/05/17--01017--019 **25.00

04/10/17--01022--004 **125.00

17 MAY 10 09:41

M. MOON
MAY 10 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2017

ROBERT E LEE
2450 HOMESTEAD CIRCLE
NORTH PORT, FL 34286

SUBJECT: GENERAL LLE SERIVCES LLC.
Ref. Number: W17000032268

We have received your document for GENERAL LLE SERIVCES LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A additional check or money order for \$25 dollars is needed in order for our office to process your conversion document. The fee for the conversion is \$150 dollars.

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.

Matthew T Moon
Regulatory Specialist II

Letter Number: 917A00007226

17 MAY 10 PM 5:41

DEPT OF STATE
APR 13 2017

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: GENERAL LEE 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:

ROBERT E. LEE

(Contact Person)
GENERAL LEE SERVICES INC.

(Firm/Company)
2450 HOMESTEAD CIRCLE

(Address)
NORTH PORT FL, 34286

(City, State and Zip Code)
genrelee227@yahoo.com

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

RECEIVED
11 FEB 10 PM 5:41

For further information concerning this matter, please call:

ROBERT E. LEE at (318) 6172772

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

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

- \$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:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center
Circle Tallahassee, FL
32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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

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:
GENERAL LEE SERVICES INC.

(Enter Name of Other Business Entity)

(P16 0000 68 569)

2. The "Other Business Entity" is a CORPORATION (INC)

(Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of FLORIDA
on August 03, 2016 (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**:

GENERAL LEE SERVICES LLC.

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: May 01, 2017

(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.

FILED
MAY 10 2017
TALLAHASSEE
FLORIDA

Signed this 26 day of March 2017.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: _____
Printed Name: ROBERT E. LEE Title: Director

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: Robert E. Lee
Printed Name: ROBERT E. LEE Title: Director

Signature: Aida M. Rengifo, L.
Printed Name: AIDA . RENGIFO Title: Director

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

- Articles of Conversion: \$25.00
- Fees for Florida Articles of Organization: \$125.00
- Certified Copy: \$30.00 (Optional)
- Certificate of Status: \$5.00 (Optional)

17 MAR 10 PM 5:41
SEP 2017

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GENERAL LEE SERVICES LLC.

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

2450 HOMESTEAD CIRCLE

North Port FL, 34286

Mailing Address:

2450 HOMESTEAD CIRCLE

North Port FL, 34286

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ROBERT E. LEE

Name

2450 HOMESTEAD CIRCLE

Florida street address (P.O. Box **NOT** acceptable)

North Port

FL 34286

City

Zip

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.

Robert E. Lee

Registered Agent's Signature (REQUIRED)

17 MAR 10 PM 5:41

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

ROBERT E. LEE

2450 HOMESTEAD CIRCLE

North Port FL, 34286

MGR

AIDA M. RENGIFO

2450 HOMESTEAD CIRCLE

North Port FL, 34286

1/17/2017 10:00 AM

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing May 1/2017 . (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 calendar days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Robert E. Lee

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.

ROBERT E. LEE

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)