L17000154741

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

Office Use Only



200300783472

07/03/17--01007--008 **35.00

07/18/17--01010--011 **115.00

17 JUL -0 PHI2: 41

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Smiley Drywall Services, LLC (Namy of Resulting Florida Limited Company)	
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045. F.	
Please return all correspondence concerning this matter to:	
Jeanne D. Smitey (Contact Person) Smiley Drywall Services, LLC Jeinn/Company) [16617 NW 38th Avenue (Address)	
Okeechobee, FL 34972 (City, State and Zip Code)	
beenawink amail. com E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
Jeanna D. Smiley at (863) 610-1286 (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 paya dollars and drawn on a bank located in the United States)	ble in US
**S125 for Articles of Organization) S155.00 Filing Fees and Certificate of S180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327	

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.

"Other Business Entity" into a Florida Limited Liability Company in accordance with 8.605.1045, Florid Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Smiley Drywall Services, Inc. 704-41728 (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Corporation</u> (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 (Enter state, or if a non-U.S. entity, the name of the country) on March 4, 2004. (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
Smiley Dryxal Services, L.C. (Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date: July 12, 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.
17 JUL -3 PH

Signed this 12th day of July	20
Signature of Authorized Representative o	f Limited Liability Company:
Signature of Authorized Representative: A Printed Name: Jeanna D. Smiky	panned Smily Tillo: Vice President & Secretary
Signature(s) on behalf of Other Business En	ntity: [See below for required signature(s)]
Signature: Welly Smily Printed Name: Willie Smily	Title: PLESIdent
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected	l, an Incorporator must sign.
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:
If Florida Limited Partnership or Limited Esignatures of ALL General Partners.	Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of	the Limited I	Liability Compa	any is:		

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

ARTICLE II - Address:

ARTICLE 1 - Name:

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

P	rin	cip	al	Office	Address:	

16617 NW 38th Avenue Okeechobee, FL 34972

Mailing Address:

16617 NW 38th Avenue Okeechobee, FL 34972

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:

Name

1661'1 NW 35" Hue.

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

Ukeerhobee

City

FL 34972

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 (REQUIREI

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Wille E. Smiley 16617 NW 38th Ave.) Okeerhobese FC 3-1972
AMBR	Jeanna D Smiley 16617 NW 38th Ave. J Okarchober, FL 34972
(Use attachment if necessary)	
(If an effective date is listed, the date must prior to or 90 calendar days after the date of	e applicable statutory filing requirements, this date will not be listed as the
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	FR 72
Wille J	my BE E
This document is executed in acc I am aware that any false informa constitutes a third degree felony a	
Willie	Sm.log ed or printed name of signee
Typ	ed or printed hame 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)

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

ARTICLE IV-

Company: