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

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COVER LETTER

TO: New Filing Section Division of Corporatio	ns	
SUBJECT: Big Sky Installation	LLC	
30b/ize1.	(Name of Resulting Florida Limit	ed Company)
The enclosed Articles of Conv Business Entity" into a "Floric	ersion, Articles of Organizati la Limited Liability Company	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all corresponden	ce concerning this matter to:	
Danae M. Bales		
(Contac	t Person)	
Big Sky Installation LLC		
(Firm/C	ompany)	
2222 School Circle		
(Add	dress)	
Sarasota, FL 34239		
(City, State a	and Zip Code)	
danaebales@mc.com		
E-mail Address: (to be used for	future annual report notifications)	
For further information concer	rning this matter, please call:	
Danae Bales	at () 519-4372
(Name of Contact Person)	(Area Code	(Daytime Telephone Number)
Enclosed is a check for the foldollars and drawn on a bank le		rocessed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.0 and Certification	00 Filing Fees	
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle	New F Divisio P. O. E	ING ADDRESS: ling Section n of Corporations ox 6327 ssee, FL 32314

INHS11 (7/17)

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

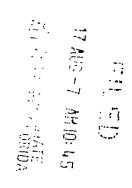
Florida Limited Liability Company

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 Business Entity" immediately prior to the filing of the Articles of Conversion is: Big Sky Installation LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on 12/27/2016 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Big Sky Installation LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (The effective date: 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.) 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 <u>02</u>	day of August	20 <u>17</u>
Signature of A	uthorized Representative of Limi	ted Liability Company:
Signature of Au	thorized Representative:anae M. Bales	T'A Change
Printed Name: 10	anae M. Baies	Title: Owner
Signature(s) on	behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	anne M. Bales	Title: Owner
Printed Name: D	anae M. Bales V	Title: Owner
Signature:		
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature		
Printed Name:	-	Title:
Signature:		Title:
Printed Name:		Title:
<i>c</i> ···		
Signature:		
Triffico Name		
If Florida Corp	orat <u>ion:</u>	
	nirman, Vice Chairman, Director, or	
If Directors or O	officers have not been selected, an In-	corporator must sign.
IEEE 11. Com	and Dankanashin and Insided Linkill	to Doutographics
	<u>ral Partnership or Limited Liabili</u> General Partner.	ty rarthership.
Signature of one	General Fundier.	
	<u>ted Partnership or Limited Liabili</u> _ <u>L</u> General Partners.	ty Limited Partnership:
All others: Signature of an o	authorized person.	
Fees:		
Articles	of Conversion:	\$25.00
	Florida Articles of Organization:	\$125.00
Certified	_	\$30.00 (Optional)
	ite of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited	Liability Company	is:			
Big Sky Installation LLC			<u> </u>		
(Must conta	iin the words "Limited Lial	oility Company, "L.L.C.," or "I	.L.C.")		
ARTICLE II - Address The mailing address and		principal office of the	Limited L	iability Compan	y is:
Principal Office Addre	<u>881</u>	Mailing Address:			
2222 School Circle		2222 School Circle			
Sarasota, FL 34239		Sarasota, FL 34239			
					
ARTICLE III - Registe (The Limited Liability Company business entity with an active F	cannot serve as its own Re forida registration.)	gistered Agent. You must design			
The name and the Florid	a street address of th	e registered agent are:			
Dana	e Marie Bales				
	Na	ime			
2222	School Circle				
		P.O. Box NOT acceptab	ole)		
Saras	sota	FL 34239			
	City	Zip			
liability company a registered agent and a statutes relating to th accept the obligatio	t the place designated gree to act in this cape proper and comple ons of my position as	d to accept service of production this certificate, I here pacity. I further agree to te performance of my diversistered agent as proving muture (REQUIRED)	reby accept o comply w ities, and I wided for in	t the appointmen ith the provision am familiar with	t as s of all h and

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager AMBR	Danae Marie Bales 2222 School Circle Sarasota, FL 34239		
	(MINORIA, 11) (MINORIA)		
			₹ ⁶⁰ • } • v 1 • • • •
(Use attachment if necessary)		10:45 	, j
TICLE V: Other provisions, if any.			_
REQUIRED SIGNATURE:			_

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.

Danae Marie Bales

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)