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(	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



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SEGRETARY OF STATE
TALLAHASSEE, FLORIDA

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#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Illuminet 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:
MOLA MIYASAKI  (Contact Person)  Illuminet LLC  (Firm/Company)
7115 NW 41st Ln (Address)
Gainesville, FL 32606  (City, State and Zip Code)  Nolam@hawaiiantel.net  E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:  NOLA MIYASAK at (808) 551-9753  (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)
\$\Bigcup \\$150.00 \text{ Filing Fees}  \text{L} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
STREET ADDRESS: New Filing Section  MAILING ADDRESS: New Filing Section

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

### 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:
(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.
First organized, formed or incorporated under the laws of Wevada  (Enter state, or if a non-U.S. entity, the name of the country)
on November 22, 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:
(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.
FILEC 17 DEC 11 AM SCOREJARY OF STALLAHASSEE, FU

Signed this 22nd day of November	20 17.
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative: Nola Printed Name: Nola MIYASAKI	Ruyasaki Tille: <u>Managing Hember</u>
Signature(s) on behalf of Other Business Entity:	
Signature hola numasaki	
Signature: Nola Nuyasaki Printed Name: NOLA MIYASAKI	Title: Managing Member
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	Tiste
rimed Name	Titte:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

Certified Copy: Certificate of Status:

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Illuminet 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:  Mailing Address:
7115 NW 41st Ln Gainesville, FL 32606 Gainesville, FL 32606
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:
NOLA MIYASAKI Name
Name
7115 NW 41st Ln
Florida street address (P.O. Box NOT acceptable)
Gainesville FL 32606
Gainesville FL 32606 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 al 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)

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

NOLA MIYASAKI		
7115 NW flat LM Grainesville, FL 3260	<u> </u>	
Michael Morris 7115 NW 41st Ln Gainesville, FL 3260	<u> </u>	
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authorized representative of a member ith section 605.0203 (1) (b), Florida Statutes, I am aw	are that e felony	
YASAKI		
ed or printed name of signee		
Filing Fees		
	Michael Morris  7115 NW 416+ LM  Gainesville, FL 3 260  And Massiville, FL 3 260  And Massiville	Michael Morris 7115 NW 416+ Ln Gainesville, FL 3 2606  ALLAHASSEE THE SECOND SEE THE SECOND SECOND SEE THE SECOND SE