117000260492

(Requestor's Name)
(Address)
(100.000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(=====,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Fitting Officer.
1117-97681

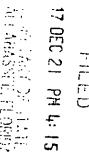
Office Use Only



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12/08/17--01026--020 **137.50

12/21/17--01002--001 **47.50



T. BURCH DEC 22 2017

COVER LETTER

TO: New Filing Section

Division of Corporations

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:

MICHAEL VAN DER MEULEN
(Contact Person)

INTERNET FOR ONE, LLC
(Firm/Company)

8148 SE PALM HAMMOCK LN
(Address)

HOBE SOUND, FLORIDA 33455
(City, State and Zip Code)

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

For further information concerning this matter, please call:

MICHAEL VAN DER MEULEN (914) 471-2439
(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)

S150.00 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

Certified Copy, and

85185.00 Filing Fees, - \$137.50 cral.t

Certificate of Status = \$\frac{\$47.50}{\text{theok} \pm 3i3}\)

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

FILED

"Other Business Entity" Into

17 DEC 21 PM 4: 15

"Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida

Statutes.

Florida Limited Liability Company Line AND CRISTATE NO CARASSEE, FLORIDA The Articles of Conversion and attached Articles of Organization are submitted to convert the following

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 COMPANY (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 APRIL 13, 2000 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
INTERNET FOR ONE, 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 18 day of DECEMBER	20 <u></u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Michael VANDER MEULE	harel Van Da Menta NTitle: OWNER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
or a 1 110 S Mark	
Signature: Michael Va Da Mede Printed Name: MICHAEL VAN DER MENLY	ENTINE OUTLER
Timed Name. Tricking L. VAN DER TEND	Write. Oto 10 ETC
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Sionature	
Signature: Printed Name:	Title:
Signature:Printed Name:	m.)
Printed Name:	Intle:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Davinanskins
Signature of one General Partner.	ty i ai theising.
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> . General Partners.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

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

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

Principal Office Ad	dress:	Mailing Address:
8148 SE PA HOBE SOUN	LM HAMMOCK LN D, FLORIDA 33455	8148 SE PALM HAMMOCK LN HOBE SOUND FLORIDA 33455
ARTICLE III - Reg (The Limited Liability Com- business entity with an act	ipany cannot serve as its own Registe	Office, & Registered Agent's Signature: gred Agent. You must designate an individual or another
The name and the Flo	orida street address of the re	egistered agent are:
_	MICHAEL VAN	DER MEULEN
_	8148 SE PAL Florida street address (P.O.	M HAMMOCK LN Box NOT acceptable)
_	HOBE SOUND City	FL 33455 Zip
liability compar registered agent an statutes relating t	ry at the place designated in ad agree to act in this capaci to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as iy. I further agree to comply with the provisions of alwerformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S
	Michael V.	a De Mal 12/7/2017
	Registered Agent's Sign	

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	MICHAEL VAN DER MEUL 8148 SE PALM HAMMUCK HUBE SUUND FL 334.
(Use attachment if necessary)	7. 000
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	A A P
[M-1 1]	" 11 <i>0</i> 4 1/10 8
This document is executed in accordance	an authorized representative of a member e with section 605,0203 (1) (b), Florida Statutes, I am aware unent to the Department of State constitutes a third degree from
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. MICHAEL	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware

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

ARTICLE IV-

Company: