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| (Requestor's Name) |
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| (Address) |
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| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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18 JAN 26 AH 10: 04 SECRETARY OF STATE TAULAHASSEE, FLORIDA

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COVER LETTER

| Division of Co | | | |
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| OUD IF CT: | | | |
| SUBJECT: <u>ashle</u> | Y DEVEAU LLC (Name of Resu | dting Florida Limited Con | pany) |
| The enclosed Articles Business Entity" into a | of Conversion, Article a "Florida Limited Lia | es of Organization, an ability Company" in a | d fees are submitted to convert an "Other coordance with s. 605.1045, F.S. |
| Please return all corres | spondence concerning | this matter to: | |
| Ashley Deve | | | |
| | (Contact Person) | | |
| | (Firm/Company) | | |
| 6123 Megha | n <u>Drive</u> (Address) | | |
| Melbourne F | 1 32940 ity, State and Zip Code) | | |
| | | | |
| E-mail Address: (to be | rjdeveau@gmail.com used for future annual rep | port notifications) | |
| For further information | on concerning this mat | ter, please call: | |
| Ashley Deveau (Name of Contact | et Person) | | 57-2994 vtime Telephone Number) |
| Enclosed is a check for dollars and drawn on | or the following amou a bank located in the | nt: (All checks proces United States) | sed by this office must be payable in US |
| \$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 | S: | | ADDRESS: |
| New Filing Section | | New Filing | |
| Division of Corporati | ons | | Corporations |
| Clifton Building | A1 1 | P. O. Box 6 | |
| 2661 Executive Cent | | Tallahassee | JPL 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.

| Statutes. | |
|---|---|
| Ashley Deveau LLC | Limited Liability Company corporation. limited partnership. general partnership, common law or business trust, etc.] ated under the laws of |
| (Enter Name of Other Business Entity) | Entity" is a |
| 2. The "Other Business Entity" is a Limited Liability Compar (Enter entity type. Example: corporation, limited partnership, | ny general partnership, common law or business trust, etc. |
| First organized, formed or incorporated under the laws of(Enter state | Utah, or if a non-U.S. entity, the name of the country) |
| on 10/15/2015 (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as set for | th in the attached Articles of Organization: |
| | |
| (Enter Name of Florida Limited Liability Compa | ny) |
| 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 |
| Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records. | filing requirements, this date will not be listed as the |
| 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 which such members are entitled under ss. 605.1006 and 605.10 | members having appraisal rights the amount to 61-605.1072, F.S. |
| | |

18 JAN 26 AM 10: 04
SECRETARY OF SAILS
TALLAHASSEE FLORIDA

| | . , | |
|--|--|---------------------------------------|
| Signed this 8 day of January | 20 / 8 | |
| Signature of Authorized Representative of Lin | | |
| | | |
| Signature of Authorized Representative: | len krear | |
| Signature of Authorized Representative: Bh Printed Name: ASN Leg Deveau | Title: Mg/ | |
| , | | |
| Signature(s) on behalf of Other Business Entity: | | |
| Signature: Colley Oven Printed Name: AShley Deveay | | |
| Printed Name: AGN en Derkan | Title: May | |
| | | |
| Signature: | 27.1 | · · · · · · · · · · · · · · · · · · · |
| Printed Name: | Title: | |
| Signature: | | |
| Printed Name: | Title: | |
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| Signature: Printed Name: | Trial and the second | |
| rrinted Name: | Title: | |
| Signature: | | |
| Signature: Printed Name: | Title: | |
| | | |
| Signature: | | |
| Signature: Printed Name: | Title: | |
| If Florida Corporation: | | ₽o = |
| Signature of Chairman, Vice Chairman, Director, or | Officer. | 9.00 |
| If Directors or Officers have not been selected, an In | corporator must sign. | THE PLANT |
| Term 1) o | | 26 NS |
| If Florida General Partnership or Limited Liabili | ity Partnership: | |
| Signature of one General Partner. | | |
| If Florida Limited Partnership or Limited Liabili | ty Limited Partnership | AM 10: 04 E. FLORIO |
| Signatures of ALL General Partners. | es asserted the contact of the conta | 26 CF |
| | | i Na Pili |
| All others: | | |
| Signature of an authorized person. | | |
| Fces: | | |
| Articles of Conversion: | \$25.00 | |
| Fees for Florida Articles of Organization: | \$125.00 | |
| Certified Copy: | \$30.00 (Optional) | |
| Certificate of Status: | \$5.00 (Optional) | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE 1 - Name: The name of the Limited Liability Company is: Ashley Deveau 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: 6123 Meghan Drive 6123 Meghan Drive Melbourne FI 32945*** Melbourne Fl 32940 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: Ashley Deveau Name 6123 Meghan Drive Melbourne Florida street address (P.O. Box NOT acceptable) Melbourne

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..

Zip

Registered Ageny's Signature (REQUIRED)

City

(CONTINUED)

| Title: | Name a | nd Address: | | | |
|---|--------------|---------------|----------------|----------------|---|
| "AMBR" = Authorized Member "MGR" = ManagerMGR | Ashley | Deveau | | | |
| · · · · · · · · · · · · · · · · · · · | 6123 N | leghan Drive | | | • |
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| CLE V: Other provisions, if any | | | | AH 10: | |
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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.

Ashley Deveau

Typed or printed name of signee

Filing flees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)