L18000558403

₹

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		,

Office Use Only



800309023678

02/15/16~-01024--002 **150.00

18 FEB 15 PH 1: 08

MAR 0 8 2018 C Kinsey

COVER LETTER

TO: New Filing Section
SUBJECT: 100r Boys Ower Equipment 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:
Polit Boys Power Enginment L.L.C. (Fired Contact Person) Polit Boys Power Enginment L.L.C. (Fired Company) Ilosof Spring Street (Address) White Spring Fl. 32096 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call: VISTEN SKINNER POOR DOUS DE (D. U.C.) Com at (386) 397-4339 (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)
\$150.00 Filing Fees (\$25 for Conversion and Certificate of Status of Organization) \$180.00 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 Division of Corporations P. O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Conversion

For

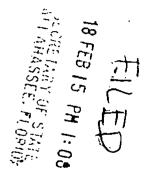
"Other Business Entity"

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: Sor Bass Power Education of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Or Dor at 7 on (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, lithited partitership, general partitership, common law of outsiness dust, etc.)
First organized, formed or incorporated under the laws of Forida (Enter state, or if a non-U.S. entity, the name of the country)
on 4-01-2010
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Poor Bois Power Equipment LLC (Enter Name of Plorida Limited Liability Company)
Tool DOINS TOWER CAMPITIENT L.C.
4. If not effective on the date of filing, enter the effective date: March 2018 (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 14th day of February	2018
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Church Printed Name: Christoper D. Lee	offer D. Lee Title: President
Signature(s) on behalf of Other Business Entity:	
Signature: Christopher D. Lee Printed Name: Christopher D. Lee	Title: President.
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 ~ \$125.00 ~ \$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:

O (111201 2011211 210 110120 211211 21111 21	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
16804 Spring St. White Spring Ft. 32096	9130 SE 128th Ave. White Springs, Fl. 32094
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	,— ~ :,
Christopher D. Name	Lee AREAS TO
9130 SE. 128th	
Florida street address (P.O.	Box NOT acceptable)
White Oprings City	FL 32 096 Sr Ca
	•

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-	
The name and address of each person authorized to manage and control the Limited Liabil	ity
Company:	

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager AMBR	Kristen (Kinner 4877 85th Rd Live Oak, 32060
<u>MGR</u>	Angela Lee 9/30 SE 178th Ave. White Springs, Fl. 32056
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
This document is executed in accordance w	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that cent to the Department of State constitutes a third degree felony
Type	ed or printed name of signee

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