118 000 072 472

(Requestor's Name)
(Address)
(Address)
(City/State/Xip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special instructions and areas and areas and areas and areas and areas areas and areas are

Office Use Only



400300778424

03/09/18--01027--001 **:55.00

18 MAR -9 PH 2: 13
SECNCIA-YOUR DARWAY

D O'KEEFE MAR 2.2 2018



Cepy



February 9, 2018

SHEILA GERSHOWITZ 7627 TRAPANI LANE BOYNTON BEACH, FL 33472-7389

SUBJECT: SRG REPRESENTATIVE SERVICES, LLC

Ref. Number: W18000013250

We have received your document for SRG REPRESENTATIVE SERVICES, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

We have received your document for SRG REPRESENTATIVE SERVICES, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$155.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 218A00002792

18 MAR -9 PH 2: 13 Scorling of 12 TALLAHASSEE, FLORES

€Ð -

COVER LETTER

TO: New Filing So Division of C				
SHDIECT, SRG Rep	resentative Services, LLC			
SUBJECT.	(Name of Res	ulting Florida Limite	ed Con	npany)
		_		d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
Sheila Gershowitz				
	(Contact Person)			
	(Firm/Company)			
7627 Trapani Lane				
	(Address)			
Boynton Beach, FL 3347	72-7389			
((City, State and Zip Code)			
srgtax2015@gmail.com				
E-mail Address: (to b	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
Sheila Gershowitz		_at (738-0	241
(Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the		rocess	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 and Certified Cop		☐S185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILI	NG A	ADDRESS:
New Filing Section New Fi		ling Section		
Division of Corporat	ions		on of Corporations	
Clifton Building 2661 Executive Cent	or Cirolo	P. O. Be		27 FL 32314
TOO I LACCHING COIL	CI CHUIC	ा वागवानि	3366, 1	: し フニン・マ

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: SRG Representative Services, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a 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
(Enter state, or if a non-U.S. entity, the name of the country)
March 9, 2001
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SRG Representative Services, 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.)
<u>Note:</u> 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 30th da	of January	20_18
		nited Liability Company:
Signature of Authorized I Printed Name: Sheila R. Ger	Representative: A here	Title: President
Signature(s) on behalf of	Other Business Entity:	[See below for required signature(s)]
Signature:Printed Name:		Title:
Signature:Printed Name:		Title:
Signature:Printed Name:		Title:
		Title:
Signature:		
Signature:Printed Name:		Title:
If Florida Corporation: Signature of Chairman. Vi If Directors or Officers have		
If Florida General Partn Signature of one General I		lity Partnership:
If Florida Limited Partners Signatures of ALL Genera		lity Limited Partnership:
All others: Signature of an authorized	person.	
Fees:		
Articles of Conve	sion:	\$25.00

\$125.00

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

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status: HED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SRG Representative Services, LLC		
with Contain the Words	.imited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street addr	ess of the principal office of the Limited Liability Compan	y is:
Principal Office Address:	Mailing Address:	
7627 Trapani Lane	7627 Trapani Lane	
Boynton Beach, FL 33472	Boynton Beach, FL 33472	
business entity with an active Florida registrati		
business entity with an active Florida registrati	ress of the registered agent are:	
business entity with an active Florida registrate The name and the Florida street add	ress of the registered agent are:	
business entity with an active Florida registrate The name and the Florida street add	ress of the registered agent are:	
The name and the Florida street add Sheila R. Gershow 7627 Trapani Lane	ress of the registered agent are:	
The name and the Florida street add Sheila R. Gershow 7627 Trapani Lane	ress of the registered agent are: Name	
The name and the Florida street add Sheila R. Gershow 7627 Trapani Lane Florida street as Boynton Beach	ress of the registered agent are: Name Idress (P.O. Box NOT acceptable)	

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Sheila R. Gershowitz
7627 Trapani Lane
Boynton Beach, FL 33472
<u></u>
H A
S S
្តា ក្រា
<u> </u>
77

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.

Sheila R. Gershowitz

Typed or printed name of signee

63

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)