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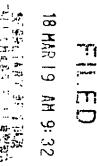
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u>. </u>

Office Use Only



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T SCHROEDER

COVER LETTER

TO: New Filing Solution of C				
SUBJECT: Quad Pro	perty Services, LLC.			
	(Name of Res	sulting Florida Limit	ed Con	npany)
	· · · · · · · · · · · · · · · · · · ·	_	-	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
Anna Berry				
	(Contact Person)			
Quad Property Services				
	(Firm/Company)			
1981 Edgewood Drive				
	(Address)			
Navarre, Florida, 32566	· ·			
((City, State and Zip Code)			
quadpropertyservices@g	mail.com			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
Anna Berry		_at (⁵⁰²	333-2	898
(Name of Conta	ict Person)	(Area Code)	(Day	rtime 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.		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAILI	NG A	ADDRESS:
New Filing Section		New Fi	_	
Division of Corporat	ions			Corporations
Clifton Building	or Cirolo	P. O. Bo		
2661 Executive Cent	er Circle	і апапа	ssee,	FL 32314

Tallahassee, FL 32301

<u>Articles of Conversion</u>

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:

Quad Property Services, LLC.

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company
2. The "Other Business Entity is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
August 26, 2016
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Quad Property 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.)
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.
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Signed this 15th day of March	20_18
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: MV Printed Name: Anna Berry	Title: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name: Roger Alan Berry	
Printed Name: Roger Alan Berry	Title: Authorized Member
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
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.	
Fces:	المحية
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional) 18 MAR 19 AM 9: 32

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLE L. Nomo	
ARTICLE 1 - Name: The name of the Limited Liability Company	'is:
Quad Property Services, LLC.	
(Must contain the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1981 Edgewood Drive	1981 Edgewood Drive
Navarre, Florida 32566	Navarre, Florida 32566
	ered Office, & Registered Agent's Signature: legistered Agent. You must designate an individual or another the registered agent are:
Anna Berry	
N	ame
1981 Edgewood Drive	
Florida street address (P.O. Box NOT acceptable)
Navarre	FL 32566
City	Zip
liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and comples accept the obligations of my position as Registered Agent's	nd to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as a pacity. I further agree to comply with the provisions of a sete performance of my duties, and I am familiar with and se registered agent as provided for in Chapter 605, F.S Signature (REQUIRED)

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Anna Berry	
	1981 Edgewood Drive	
	Navarre, Florida 32566	
AMBR	Roger Alan Berry	
	1981 Edgewood Drive	
	Navarre, Florida 32566	
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(Use attachment if necessary)		
		, ,
SLE V. Other provinces if any		
CLE V; Other provisions, if any.		
· · · · · · · · · · · · · · · · · · ·		
REQUIRED SIGNATURE:	7	
MMACO	MMM/	
Signature of a member or	an authorized representative of a member	
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware the	at
	iment to the Department of State constitutes a third degree fel-	ony
as provided for in s.817.155, F.S.		
Anna Berry		
	yped 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)