# [1800]C2825

(Requestor's Name)				
(Address)				
(Address)				
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	usiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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### FLORIDA DEPARTMENT OF STATE Division of Corporations TATE TO MERCIAL THE TOTAL TOT

May 2, 2018

NATHAN J MEYER 1208 DUVAL STREET KEY WEST, FL 33040

SUBJECT: ARCHEO LLC Ref. Number: W18000013912

We have received your document for ARCHEO LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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

If your document, please call (850) 245-6052.

Keyna E Page

Regutatory Specialist II

Letter Number: 218A00002931

### **COVER LETTER**

10:	Division of C				
SURI	ECT:	Arch	eo LLC		
0000		(Name of Res	ulting Florida Limited Con	npany)	
The en	nclosed Article: ess Entity" into	s of Conversion, Articl a "Florida Limited Li	es of Organization, an ability Company" in ac	d fees are submitted to convert an ecordance with s. 605.1045, F.S.	"Other
Please	return all corre	espondence concerning	g this matter to:		
	Nath	an J. Me	ever		
	Ard	(Contact Person)			
	1208	(Eirm Company)  OUV S  (Address)	7		
	Key	Nost, FL	33040		
	Notec	City, State and Zip Code)  Over Kuye  e used for future annual re	(e) COM		
		on concenting this mat			
$\mathcal{V}$	(Name of Conta	Act Person)	at (305) S (Area Code) (Day	time Telephone Number)	
		for the following amount a bank located in the		sed by this office must be payable	in US
(\$25 fc & \$123	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	25185.00 Filing Fees. Certified Copy, and Certificate of Status	
New	EEF ADDRES Filing Section ion of Corporat		MATCHNG A New Filing S Division of C	ection	

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building 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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on $\frac{2/13/2001}{\text{(date of organization, formation or incorporation)}}$
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(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 16th day of January	_ 20 <u>18                                     </u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:  Printed Name: 1. May 2.	Title: Maraging Marbor
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)
Signature: JAJO An Al Printed Name: Jeff D Asplunch	Title: Director
Signature: Printed Name:	Title:
Signature: Printed Name:	_ Title:
Signature: Printed Name:	
Signature:Printed Name:	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an inc	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ry 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:	
Archao LLC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.,")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
19158 Petro Rd 19158 Petrico Rd	
33047 300 1000 1000 1000 1000 1000 1000 1000	
The name and the Florida street address of the registered agent are:  Name  Name	
Florida street address (P.O. Box NOT acceptable)	;
Sugarloat Key FI 33047 Fig. 3	: 1,
Having been named as registered agent and to accept service of process for the above stated limite liability company at the place designated in this certificate. Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of 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  Registered Agent's Signature (REQUIRED)	ali

(CONTINUED)

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
	SECOLUL JUL
<del></del>	SSE - 3
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree follows
Nather Tur	m Therefore of signed or printed name of signed

...

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)