49232

(Re	equestor's Name)	
(Ad	idress)	
(Ad	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

M. MOON OCT 25 2019



700318247857

09/14/18--01029--001 **150.00

W14-82898



COVER LETTER

Division of Corporations SUBJECT: AUK THE 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: (Contact Person)

AC/KC THC

(Firm/Company) 1339 Robert King High Drive (Address) Lakeland, FL 33865
(City, State and Zip Code) One KC 4925 @ grad. (om

E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Keuin Coupenter at (850) 213 (773

(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) 2 \$150.00 Filing Fees □\$155.00 Filing Fees □\$180.00 Filing Fees □\$185.00 Filing Fees, (\$25 for Conversion and Certificate of Certified Copy, and and Certified Copy & \$125 for Articles Status Certificate of Status of Organization) STREET ADDRESS: MAILING ADDRESS: **New Filing Section** New Filing Section Division of Corporations **Division of Corporations** Clifton Building P. O. Box 6327

Tallahassee, FL 32314

4

2661 Executive Center Circle

Tallahassee, FL 32301

TO:

New Filing Section

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a(Or pore+10/) (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on 41111017 In (orporstion). (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: 11/1/01/ (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.
18 OCT 22

Signed this 12 day of September	2018	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: Kenin Carpenter	pert	
Printed Name: Keuin Carpenter	Title: M&L	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
Printed Name: Kyun Corporate		
Printed Name: Noun Carpinter	_ Title:	
Signature:Printed Name:		
Signature:Printed Name:	Title:	
Signature:Printed Name:		
Printed Name:	_ Intle:	
Signature: Printed Name:	_ Title:	
Signature:Printed Name:		
Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	orporator must sign.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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)	00T 22 PH I2: 53

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	_		
The name of the Limited Liability Compan	y is:		
AACKC LLC			
(Must contain the words "Limited L	iability Company, '	'L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and street address of the	he principal of	fice of the Limit	ed Liability Company is:
Principal Office Address:	<u>Mailing</u>	Address:	
1339 Rober: King High Drive Lake lead, Ala 37805	1339	Yoskri King High	Deve
Lake kal, As	<u> </u>	150, FLD	
37865	3)	805	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Registered Agent. \	You must designate an	
The name and the Florida street address of	the registered	agent are:	
Keun Carpenter			
Keun Carpenter	Vame		
Florida street address			
Florida street address	(P.O. Box <u>NO</u>	T acceptable)	
<u>Latelanl</u> City	FL	33805	
City		Zip	
Having been named as registered agent a liability company at the place designat registered agent and agree to act in this co statutes relating to the proper and comp accept the obligations of my position a	ted in this certif apacity. I furth lete performan	ficate, I hereby a ver agree to comp ce of my duties, c	ccept the appointment as ply with the provisions of all and I am familiar with and
Ken Corps			2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2
Registered Agent's	Signature (RE	QUIRED)	130
CON	TINUED)		13 -
(CON	INUED		- 1 · 1
			6. 12
			53

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
·	
	
(Use attachment if necessary)	
(Ose attachment if necessary)	p.
LE V: Other provisions, if any.	
	
NEGATION CLONES	
REQUIRED SIGNATURE:	
Keyi Corpor	
Signature of a' member or	an authorized representative of a member
any false information submitted in a docu as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am aw ment to the Department of State constitutes a third degre
Keuin Caronter	
Ту	ped or printed name of signee
	Filing Fees

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

ARTICLE IV-

Company: