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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

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18 DEC -5 AMII: 2: SECRETARY OF SIAI ALLAHASSEE, FLORIO

B DEC - S AHII: 1

COVER LETTER

TO: New Filing Section Division of Corporations	0
SUBJECT: PO Plumbly School (Name of Resulting Flor	da Limited Company)
The enclosed Articles of Conversion, Articles of Org Business Entity" into a "Florida Limited Liability C	ganization, and fees are submitted to convert an "Other ompany" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this ma	iter to.
Plus Pumbru [(Firm/Company)	
(Contact Person)	
the rumbing	
(Firm/Combany)	
14221 SW 136 31	
(Address)	
(Address) Mimi F 33186 (City, State and Zip Code)	
(City, State and Zip Code)	ä
E-mail Address: (to be used for future annual report notif	cations) ALE
For further information concerning this matter, plea	ise call: 축을 중 그
Olic Suntana at (3) (Name of Contact Person)	Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All dollars and drawn on a bank located in the United	checks processed by this office must be payable in US
	0.00 Filing Fees crtified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327
Clifton Building	Tallahassee, FL 32314

ē -

2661 Executive Center Circle Tallahassee, FL 32301

P150000 88638

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.

Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Proposition Propos
Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on 10/24/5 (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: Date of filing (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.
 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.
FIL 18 DEC-5 TALLAMASSEE

Signed this 29 day of November	_20_18
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative:	
Signature of Authorized Representative: Printed Name: Described Santana	_ Title:
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)
Signature: James J Mecall	
Printed Name James) Mccull	Title: OFFices
Timed Name.	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	The
Printed Name:	I itie:
Signature:Printed Name:	Title:
Printed Name:	Tide
Signature:	
Printed Name:	Title:
Times ivano.	
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partner.	lity Partnership:
If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners.	lity Limited Partnership:
All others: Signature of an authorized person.	

\$25.00

\$125.00

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

Fees:

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

FILED
18 DEC-5 AN II: 2:
FALLAHASSEE FEBRING

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pro	Contain the words "Limited Liability	Jice and Re Company, "L.L.C.," or "LLC.")	pain LL	√C.
ADTICLE II Add				
Principal Office Ad	dress:	Mailing Address:		
14228 G M.m. P	5w 36th 5T			
(The Limited Liability Con- business entity with an act	gistered Agent, Registered in pany cannot serve as its own Register tive Florida registration.) orida street address of the result of the res	egistered agent are: Cantana 1365T Box NOT acceptable)	SECRETARY OF LIA.	FILED 18 DEC-5 AHII: 23

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

AMBR" = Authorized Member		
MGR" = Manager	Lace M Cueto	
MGR	JUSC	
	Mim: K 33186	
A		
AMBR	1428 SW 136 ST.	•
	M. w., t 3318C	-
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	Dr.	Ü
(Use attachment if necessary)		
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WE W. Other provisions if any		
CLE V: Other provisions, if any.		
CLE V: Other provisions, if any.		
CLE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:	and congregative of a member	
REQUIRED SIGNATURE: Signature of a member of	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am aware	tha
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant any false information submitted in a document.	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am aware scument to the Department of State constitutes a third degree for	tha elor
Signature of a member of This document is executed in accordan any false information submitted in a doc as provided for in s.817.155, F.S.	occument to the Department of State constitutes a third degree fi	tha
Signature of a member of This document is executed in accordan any false information submitted in a doc as provided for in s.817.155, F.S.	occument to the Department of State constitutes a third degree fi	tha
Signature of a member of This document is executed in accordant any false information submitted in a document as provided for in s.817.155, F.S. Aux Sa		_

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

ARTICLE IV-

Company: