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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:	

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SECRETARY PROTEINS

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1883 W. Royal Hunte Dr. Suite 200 Cedar City, Utah 84720 Phone 435-586-9366 Fax 435-586-9491 Andrea Emans, Paralegal andrea@kkoslawyers.com

January 25, 2019

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

Enclosed for processing are duplicates of the Articles of Conversion for Always Here Enterprises, LLC. Also enclosed is a check in the amount of \$150.00 to cover the filing fee.

If you find the enclosed document acceptable, please note your acknowledgment of receipt on the copy and return it to my office with the enclosed return envelope as noted above.

Thank you for your anticipated attention to this matter.

Very truly yours,

KYLER KOHLER OSTERMILLER & SORENSEN, LLP

Andrea Emans, Paralegal

Enclosure

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.

2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, co	ommon law or business trust, etc.)
First organized, formed or incorporated under the laws of(Enter state, or if a non-U.S. entition of the laws of(Enter state, or if a non-U.S. entition of the laws of(Enter state, or if a non-U.S. entition of the laws of(Enter state, or if a non-U.S. entition of the laws of	the the name of the neural of
03/05/2014	ty, the name of the country)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached	Articles of Organization:
Always Here Enterprises, 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 that 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, 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 statu	utes.
 The "Converted or Other Business Entity" has agreed to pay any members having a which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	ppraisal rights the amount to

with 1		
Signed this at day of amuary	20_19	
() U		
Signature of Authorized Representative of Limit		
Signature of Authorized Representative:	anne Pendanno	
Printed Name: Susanne K. Pendarvis	Title: Manager	_
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
1		
Signature: Susame K Renda	VICO	.–
Printed Name: Susanne K. Pendarvis	Title: Manager	-
Signature:		
Signature:Printed Name:	Title:	-
Signature:Printed Name:	Tidle	-
Trinica Name.	title.	_
Signature:		_
Printed Name:	Title:	~
Signature:		
Printed Name:	Title:	
a)	·	
Signature:Printed Name:	Title	_
Timed Name.	Title.	-
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Director, or		
If Directors or Officers have not been selected, an In	corporator must sign.	
If Florida General Partnership or Limited Liabili	ty Partnership:	
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership	
Signatures of ALL General Partners.	cy connect attersup.	
		Ξ_{C}
All others: Signature of an authorized person.		19
organization and authorized person.		
Fees:		SS N =
Adialan of Canasanian	ene no	
Articles of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$125.00	PHIZ: 20
Certified Copy:	\$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	20 20
	and the formal	90

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Always Here Enterpris						
(Mus	st contain the words "Limited Lia	bility Company, "L.L.C.," or "LI.C.")				
ARTICLE II - Ado	dress:					
The mailing address	s and street address of the	principal office of the Limited Liability Cor	npany is			
Principal Office A	d <u>dress:</u>	Mailing Address:				
5753 Highway 85 North #2481		5753 Highway 85 North #2481				
Crestview, FL 32536		· · · · · · · · · · · · · · · · · · ·				
ARTICLE III - Re		red Office, & Registered Agent's Signatur				
ARTICLE III - Re (The Limited Liability Co- business entity with an ac	mpany cannot serve as its own R ctive Florida registration.)	red Office, & Registered Agent's Signature egistered Agent. You must designate an individual or another				
ARTICLE III - Re (The Limited Liability Co- business entity with an ac	mpany cannot serve as its own R	red Office, & Registered Agent's Signature egistered Agent. You must designate an individual or another the registered agent are:	er			
ARTICLE III - Re (The Limited Liability Co- business entity with an ac	mpany cannot serve as its own R ctive Florida registration.)	red Office, & Registered Agent's Signature egistered Agent. You must designate an individual or another the registered agent are:	er S			
ARTICLE III - Re (The Limited Liability Co- business entity with an ac	mpany cannot serve as its own R ctive Florida registration.) lorida street address of t Registered Agent Solutions,	red Office, & Registered Agent's Signature egistered Agent. You must designate an individual or another the registered agent are:				
ARTICLE III - Re (The Limited Liability Co- business entity with an ac	mpany cannot serve as its own Rective Florida registration.) Torida street address of the Registered Agent Solutions, N	red Office, & Registered Agent's Signature egistered Agent. You must designate an individual or another the registered agent are:				
ARTICLE III - Re (The Limited Liability Co- business entity with an ac	mpany cannot serve as its own Retive Florida registration.) lorida street address of the Registered Agent Solutions. No. 155 Office Plaza Dr. Suite A	red Office, & Registered Agent's Signature egistered Agent. You must designate an individual or another the registered agent are:				
ARTICLE III - Re The Limited Liability Co- business entity with an ac	mpany cannot serve as its own Retive Florida registration.) lorida street address of the Registered Agent Solutions. No. 155 Office Plaza Dr. Suite A	red Office, & Registered Agent's Signaturegistered Agent. You must designate an individual or another the registered agent are:				

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)

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А	к	11		. H.	IV.

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

<u>Title:</u>	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager				
MGR	Susanne K. Pendarvis 5753 Highway 85 North #2481			
				
	T			
				
(1)				
(Use attachment if necessary)	**************************************			
	<u> </u>			
RTICLE V: Other provisions, if any.	Ø 2 →			
	ri's.			
DECHIDEN CLEMATURE				
REQUIRED SIGNATURE:				
(XI, MMNO XY	L. Chappy A			
Children I No	warry)			
Signature of a member or	an authorized representative of a member			
any false information submitted in a docur	with section 605.0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony			
as provided for in s.817.155, F.S.	ment to the Department of State Constitutes a finite degree leaving			
Susanne K. Pendarvis				
* · · · · · · · · · · · · · · · · · · ·	and or minted across of sixtage			
1 y ₁	ped or printed name of signee			
	HILING MAGE			

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)