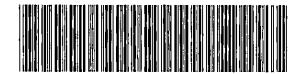
L190000 82285

(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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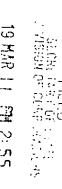
Office Use Only



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COVER LETTER

TO:	New Filing S Division of C				
SUB.	JECT:	Southern Telco	om Co	mmunications	LLC
	- "		sulting b	Torida Limited Co	ompany)
				_	and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concernin	g this r	natter to:	
		Cameron Colvin			
		(Contact Person)			
	Southern Te	Icom Communications	s LLC		
		(Firm/Company)			
		19219 Blount Rd			
	<u></u>	(Address)			
		1 EL 22550			
		Lutz, FL, 33558 City, State and Zip Code)			
		•			
E-		eron@stelcomm.com e used for future annual re	nort not	itīcations)	
		on concerning this ma			
	Cameron Co	olvin	at (813)_	482-7537
	(Name of Contr	ect Person)			Paytime Telephone Number)
		for the following amou a bank located in the		•	essed by this office must be payable in US
(\$25 f) & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	\$155.00 Filing Fees and Certificate of Status		80.00 Filing Fees Certified Copy	☐\$185.00 Filing Fees. Certified Copy. and Certificate of Status
New Divis Clifte 2661	EET ADDRES Filing Section ion of Corporat on Building Executive Cent hassee, FL 323	ions er Circle		New Filing Division of P. O. Box 6	Corporations

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.

The name of the "Other Business Entity" immedia Southern Telcom Communication	ately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Bus	siness Entity)
2. The "Other Business Entity" is a	INC - Corporation
(Enter entity type: Example: corporation, limited	d partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the law	s of Florida
	(Enter state, or if a non-U.S. entity, the name of the country)
on 01/05/2013 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Compar	ny as set forth in the attached Articles of Organization:
Southern Telcom Communication	cations LLC
(Enter Name of Florida Limited Li	ability Company)
4. If not effective on the date of filing, enter the effective	ctive date:
the date this document is filed by the Florida Department	able statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been approved in accor	dance 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.

Signed th	is 8th	day of	March	20 <u>19</u>
				ited Liability Company:
Cianatura	of Author	ized Representativ Cameron Colvin	/	still
Drinted M	or Aumor	ized Kepresemani Camaran Calvin	/e:	Tide: Chief Operation Office
THREE IN	anic.	Cameron Colvin	<u>-</u>	Title: Chief Operating Officer
			ness Entity:	[See below for required signature(s)]
Signature:	: CH	2Cl-		
Printed N	ame: <u>Ca</u>	MERON COL	i i M	Title: CEO
Signature:	· ·			
Printed Na	ame:			Title:
Signature:				m: I
Printed Na	ame:	<u> </u>		
Signature:				
Printed Na	ame:		· · · · · · · · · · · · · · · · · · ·	Title:
Signature:				
Printed Na	ame:			Title:
Signature:				
Printed Na	ame:			Title:
	Corporat			
		ın, Vice Chairman,		
II Director	rs or Office	ers have not been so	elected, an In	corporator must sign.
lf Florida	General I	Partnership or Lir	nited Liabili	tv Partnerchin
		eral Partner.	inted istabili	ev armership.
-				
<u>If Florida</u>	Limited F	artnership or Lin	<u>nited Liabili</u>	ty Limited Partnership:
Signatures	of <u>ALL</u> G	eneral Partners.		
All others	•			
Signature	<u>:-</u> of an⊾autho	orized person.		
	11	70		
Fees:	•			
Ar	ticles of C	onversion:		\$25.00
	_	ida Articles of Or	ganization:	\$125.00
	rtified Cop		-	\$30.00 (Optional)
Ce	rtificate of	Status:		\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		munications LLC pility Company, "L.E.C.," or "LLC.")	
(Must contain the	words islanted that	omey company, the.e., or thee, i	
ARTICLE II - Address:	at addings of the	principal office of the Limited Li	ability Company is:
The maning address and site	et address of the	principal office of the Emilied Lie	ability Company is.
Principal Office Address:		Mailing Address:	
4907 Florida Ave		P.O. Box 274122	
Tampa, FL, 33603		Tampa, FL, 33688	
(The Limited Liability Company cannot		red Office, & Registered Agent's	
business entity with an active Florida		gistered Agent. You must designate an indivi	dual of another
business entity with an active Florida The name and the Florida stro	registration.)		dual of another
·	registration.)	ne registered agent are:	19
·	registration.) eet address of the Cameror	ne registered agent are:	9 HAR
·	registration.) eet address of the Cameror No	ne registered agent are: n Colvin nme	19 HAR 11
The name and the Florida stro	registration.) eet address of the Cameror No. 19219 Bl	ne registered agent are: n Colvin nme ount Rd	19 HAR 11 FR
The name and the Florida stro	registration.) eet address of the Cameror No 19219 Bl street address (F	ne registered agent are: n Colvin nme ount Rd P.O. Box NOT acceptable)	19 HAR 11 FR 2:5
The name and the Florida stro	registration.) eet address of the Cameror No 19219 Bl street address (F	ne registered agent are: n Colvin nme ount Rd P.O. Box <u>NOT</u> acceptable) FL 33558	(2) MAR 1 / 图 2:
The name and the Florida stro	registration.) eet address of the Cameror No 19219 Bl street address (F	ne registered agent are: n Colvin nme ount Rd P.O. Box NOT acceptable)	19 HAR 11 FR 2:5

(CONTINUED)

ARTICLE IV-

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	Campran Calvin
MGR	Cameron Colvin 19219 Blount Rd
	Lutz, FL, 33558
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	Caral
(THUIL-
	an authorized representative of a member
This document is executed in accordance	
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes, I am award ument to the Department of State constitutes a third degree to Cameron Colvin
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	iment to the Department of State constitutes a third degree t

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)