# L19000093545

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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U3/U4/19--U1037--U25 ++15U.U0

TALLAHASSEE, FLORIDA

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March 19, 2019

WILLIAM J. MILLER WJM EQUIPMENT SERVICE LLC 1014 COUNTRY OAKS BLVD LAKE WALES, FL 33898

SUBJECT: WJM EQUIPMENT SERVICE LLC

Ref. Number: W19000026589

We have received your document for WJM EQUIPMENT SERVICE LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 619A00005403

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(19)

## **COVER LETTER**

TO: New Filing Section Division of Corporations	
STIRLECT: WJM Equipment Service	LLC
(Nam	Division of Corporations  JECT: WJM Equipment Service LLC  (Name of Resulting Florida Limited Company)  enclosed Articles of Conversion. Articles of Organization, and fees are submitted to convert an "Other ness Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.  e return all correspondence concerning this matter to:  m J. Miller  (Contact Person)  Equipment Service LLC  (Finn/Company)  Country Oaks Blvd  (Address)  Wales, FL 33898  (City, State and Zip Code)  quipment@comcast.net  mail Address: (to be used for future annual report notifications)  further information concerning this matter, please call:  m J. Miller  (Name of Contact Person)  at (863 ) 528-4675  (Arac Code) (Daytime Telephone Number)  osed is a check for the following amount: (All checks processed by this office must be payable in US are and drawn on a bank located in the United States)  50.00 Filing Fees and Certificate of Status  surface Status  All LING ADDRESS:  Filing Section  Division of Corporations  Division of Corporations  Division of Corporations  P. O. Box 6327  Tallahassee, FL 32314
The enclosed Articles of Conversion Business Entity" into a "Florida Lim	. Articles of Organization, and fees are submitted to convert an "Other ited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence con	cerning this matter to:
William J. Miller	
(Contact Person	n)
WJM Equipment Service LLC	
(Firm/Company	<del>/)</del>
1014 Country Oaks Blvd	
(Address)	
Lake Wales, FL 33898	
(City, State and Zip	Code)
wjmequipment@comcast.net	
E-mail Address: (to be used for future a	nnual report notifications)
For further information concerning t	
William J. Miller	at (863 )528-4675
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the followin dollars and drawn on a bank located	g amount: (All checks processed by this office must be payable in US in the United States)
(\$25 for Conversion and Certificate of	f and Certified Copy Certified Copy, and
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	New Filing Section Division of Corporations P. O. Box 6327

## 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:  WJM Equipment Service, Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on April 6, 2004  (date of organization, formation or incorporation)  3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  WJM Equipment Service 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 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 27 day of February	20 19 .
Signature of Authorized Representati	ve of Limited Liability Company:
Signature of Authorized Representative: Printed Name: William J. Miller	Mile: Managing Member
	s Entity: [See below for required signature(s)]
Signature: 2/W 1 mill	
Printed Name: William J. Moler	Title: President
Sionature:	_
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
Signature:	Til
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman. E If Directors or Officers have not been sele	
If Florida General Partnership or Limi Signature of one General Partner.	ted Liability Partnership:
If Florida Limited Partnership or Limi Signatures of ALL. General Partners.	ted Liability Limited Partnership:
All others: Signature of an authorized person.	

\$25.00 \$125.00

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

Fees:

Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: 19 MAR 26 PH 4: 4

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	any is:	
WJM Equipment Service LLC		
(Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
1014 Country Oaks Blvd	PO Box 522	
Lake Wales, FL 33898	Babson Park, FL 33827	
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)  The name and the Florida street address of	rn Registered Agent. You must designate an	individual or another
William J. Miller	Name	
	Name	
1014 Country Oaks Blvd		
Florida street addres	s (P.O. Box <u>NOT</u> acceptable)	
Lake Wales	FL 33898	
City	Zip	
Having been named as registered agent liability company at the place design registered agent and agree to act in this statutes relating to the proper and com accept the obligations of my position Registered Agent	ated in this certificate, I hereby ac capacity. I further agree to comp uplete performance of my duties, a	ecept the appointment as ply with the provisions of all and I am familiar with and
(CO	NTINUED)	

### ARTICLE 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		
AMBR	William J. Miller	
<del></del>	1014 Country Oaks Blvd	
	Lake Wales, FL 33898	
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(Use attachment if necessary)	<u> </u>	
(Ose attachment in necessary)	<b>売</b> 込	HAR 26
	<u> </u>	PH PH
<b>ICLE V:</b> Other provisions, if any.		
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### REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

William J. Miller

Typed or printed name of signee

### 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)