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COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: Allied Doors West Florida, LLC

(Name of Resulting Florida Limited Company)

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:

Patrick B. Casey, J.D., CPA

(Contact Person)

CASEY LAW GROUP, PL

(Firm/Company)

P.O. Box 2527

(Address)

Bonita Springs, FL 34133

(City, State and Zip Code)

patrick@caseylawoffice.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

 Patrick B. Casey
 at (239)

 (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)

\$150.00 Filing Fees	□\$155.00 Filing Fees	□\$180.00 Filing Fees	□\$185.00 Filing Fees,
(\$25 for Conversion	and Certificate of	and Certified Copy	Certified Copy, and
& \$125 for Articles	Status		Certificate of Status
of Organization)			

STREET ADDRESS:

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 **MAILING ADDRESS:**

New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Allied Doors West Florida, Inc.

> (Enter Name of Other Business Entity) Florida for profit corporation

PLO 000026486

2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of _____

(Enter state, or if a non-U.S. entity, the name of the country)

03/25/2010

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Allied Doors West Florida, LLC

on

(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.



	· . ·			
Signed	this 1st	day of <u>May</u>		20 <u>19</u>
<u>Signat</u>	<u>ure of Authori</u>	zed Representative of	Limite	d Liability Company:
Signati Printed	ure of Authorize Name <u>: Steven A</u>	ed Representative: $\underbrace{ ot} u$	r fera	Title: Manager
Signat	ure(s) on behall	of Other Business Ent	<u>ity:</u> [\$	ee below for required signature(s)
Signatu	ITC: X Stul	r C. Romane	Ŋ	
Printed	Name: Steven A	. Romanelli		Title: President
Signatu	ıre:			
Printed	Name:			Title:
Signati	ire:			
Printed	Name:			Title:
Signatu Printed	ure: Name:			Title:
Signatu Printed	ıre: Name:			Title:
Signatu Printed	ire: l Name:			Title:
Signati		<u>n:</u> , Vice Chairman, Directo have not been selected, a		
	ida General Pa ure of one Gener	rtnership or Limited Li al Partner.	iability	Partnership:
	<mark>ida Limited Pa</mark> ares of <u>ALL</u> Ger	rtnership or Limited Li heral Partners.	iability	Limited Partnership:
<u>All oth</u> Signati	i <mark>ers:</mark> are of an authori	zed person.		
Fees:				
	Articles of Cor Fees for Florid Certified Copy Certificate of S	a Articles of Organizati		\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Allied Doors West Florida 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 Limited Liability Company is:

Principal Office Address:	Mailing Address:
1509 Railhead Blvd	same
Naples, FL 34110	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		`
The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another	сı	.≤
business entity with an active Florida registration.)		<u></u>
	و خ	- 92

The name and the Florida street address of the registered agent are:

City

CASEY LAW GROUP.	. PL.
	Name
9990 Coconut Road	
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
Estaro	FL 34135

Zip

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.

(gnature (REQUIRED) Registered Agent's S

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR	Steven A. Romanelli	
	1509 Railhead Blvd	
	Naples, FL 34110	
		1 0 18 0 13 1 0 13 1 0
(Use attachment if necessary)		
	2.	W1 22

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ARTICLE V: Other provisions, if any.

<u>REQUIRED</u> SIGNATURE: X Steven C. Romanell
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 &
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)