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| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | ldress)            |             |
| (Ad                     | ldress)            |             |
| (Cit                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nar  | me)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
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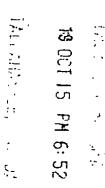
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HARRIS L. BONNETTE, JR.\*
ANNE BUZBY-WALT\*
ROSS H. CHAFIN
ROBERT A. DAWKINS\*

BEVERLY H. FURTICK\*
ANN H. JANOSKI
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MARVIN C. KLOEPPEL\*

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KRISTA WALDRON RAY MARY A. ROBISON<sup>®</sup> SCOTT ST. AMAND KRISTIE A. SAOUD CLAY B. TOUSEY III
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PLEASE REPLY TO: JACKSONVILLE OFFICE

www.fishertousey.com

FISHER, TOUSEY, LEAS & BA

October 9, 2019

Florida Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

Conversion of Closerware, LLC, a Connecticut limited liability company to

Closerware, LLC, a Florida limited liability company

Document Number: 77915

### Dear Sir/Madam:

Re:

Enclosed, please find two duplicate copies of the Articles of Conversion and Articles of Organization to convert Closerware, LLC, a Connecticut limited liability company, to Closerware, LLC, a Florida limited liability company.

Also enclosed is a check made payable to the Florida Department of State for \$150.00 which represents the required fee.

We request that you date stamp the provided duplicate copy and return it to this office in the enclosed self-addressed, stamped envelope. If you have any additional questions, please contact me at (904) 356-2600 ext. 365.

Sincerely,

Brittany A<sup>J</sup> Cook-Marsh

Buttary & Marsh

Paralegal

Enclosures 974647

# **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: Closerware, LLC   |
|--|
| (Enter Name of Other Business Entity)  |
| 2. The "Other Business Entity" is a  |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et   |
| First organized, formed or incorporated under the laws of  |
| (Enter state, or if a non-U.S. entity, the name of the country)  |
| January 30, 2004<br>On   |
| (date of organization, formation or incorporation)   |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization   |
| Closerware, 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 afte 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 20th day of May   | _ 20_19  |          |             |
|---|--|----------|-------------|
| Signature of Authorized Representative of Limit   |  |          |             |
| Signature of Authorized Representative:  Printed Name: Robert Hopwood   | Title: Manager   |          |             |
| Signature(s) on behalf of Other Business Entity: [  | See below for required signature(s)]                           |          |             |
| Signature: Printed Name: Robert Hopwood   | Title: Manager   |          |             |
|   |  |          |             |
| Signature:Printed Name:   | Title:   | ð        |             |
| Signature:Printed Name:   | Title:   |          |             |
| Signature:  |  |          |             |
| Signature: Printed Name:  | Title:   |          |             |
| Signature: Printed Name:  | Title:   |          |             |
| Signature:  |  |          |             |
| Printed Name:   | Title:   |          |             |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. |  |          |             |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner.                                | y Partnership:   |          |             |
| If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.                              | y Limited Partnership:   |          |             |
| All others: Signature of an authorized person.  |  | <u> </u> | रहें        |
| <u>Fees:</u>  |  | 3.<br>3. | 1.130       |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:           | \$25.00<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) |          | 15 PM 6: 52 |

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Closerware, LLC   |   |                  |                      |
|---|---|------------------|----------------------|
| (Must contain the words "Limit  | ed Liability Company, "L.L.C.," or "LLC.")  |                  |                      |
| ARTICLE II - Address:   |   |                  |                      |
| The mailing address and street address  | of the principal office of the Limited  | Liability Co     | ompany is            |
| Principal Office Address:   | Mailing Address:  |                  |                      |
| 25 N. Market St.  | 25 N. Market St.  |                  |                      |
| Jacksonville, Florida 32202   | <del></del>   |                  |                      |
| Jacksonvine, Fronda 32202   | Jacksonville, Florida 32202   | <del></del>      |                      |
|   |   | 41- 61           |                      |
| ARTICLE III - Registered Agent, Re The Limited Liability Company cannot serve as its  | gistered Office, & Registered Agen  |                  |                      |
| ARTICLE III - Registered Agent, Re<br>(The Limited Liability Company cannot serve as its<br>business entity with an active Florida registration.)   | gistered Office, & Registered Agen<br>own Registered Agent. You must designate an ind                                 | lividual or anot |                      |
| ARTICLE III - Registered Agent, Re<br>(The Limited Liability Company cannot serve as its<br>business entity with an active Florida registration.)   | gistered Office, & Registered Agen<br>own Registered Agent. You must designate an ind                                 | lividual or anot | her<br>茲             |
| ARTICLE III - Registered Agent, Re<br>(The Limited Liability Company cannot serve as its<br>business entity with an active Florida registration.)   | gistered Office, & Registered Agen<br>own Registered Agent. You must designate an ind                                 |                  | her<br>13 001        |
| ARTICLE III - Registered Agent, Re The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address                                   | gistered Office, & Registered Agen<br>own Registered Agent. You must designate an ind                                 | lividual or anot | her 13 00T 15        |
| ARTICLE III - Registered Agent, Re The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address  Mark Hopwood                    | gistered Office, & Registered Agen own Registered Agent. You must designate an ind of the registered agent are:       | lividual or anot | her<br>13 001        |
| ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address  Mark Hopwood  25 N. Market St. | gistered Office, & Registered Agen own Registered Agent. You must designate an ind of the registered agent are:       | lividual or anot | her 13 00T 15        |
| ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address  Mark Hopwood  25 N. Market St. | gistered Office, & Registered Agen own Registered Agent. You must designate an ind of the registered agent are:  Name | lividual or anot | her 19 OCT 15 FH 6:5 |

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.

Registered Agent's Signature (REQUIRED)

(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                         |  |
| MGR                                     | Robert Hopwood   |
|   | 25 N. Market St.   |
|   | Jacksonville, Florida 32202  |
|   |  |
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| LE V: Other provisions, if any.         | `  |
| 1                                       |  |
| REQUIRED SIGNATURE:                     |  |
| Signature of a member or                | an authorized representative of a member   |
| This document is executed in accordance | e with section 605.0203 (1) (b), Florida Statutes. I am aware turnent to the Department of State constitutes a third degree fellows. |
| Mark Hopwood, as the Authorized Rep     |  |
| Ty                                      | vped 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)