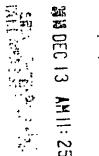
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(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
(Bocament Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		



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13 2020

T. SCOTT

TOMMY D. PERMENTER, JR.

THE ERMENTER LAW FIRM, P.A.

Bellwether Professional Park 2201 S.E. 30th Avenue, Suite 202 Ocala, Florida 34471

December 12, 2019

Telephone
(352) 622-1811
Facsimile
(352) 622-1866
Email
Tommy@Permenterlaw.com

**VIA FEDERAL EXPRESS** 

New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Florida 32303

Re: Citrus Laundry Inc./LLC

Articles of Conversion

Ladies and Gentlemen:

Enclosed please find the Articles of Conversion for "Other Business Entity" into Florida Limited Liability Company for Citrus Laundry Inc., for filing, to be effective January 1, 2020.

Also, enclosed is our firm's check in the amount of \$180.00 representing the filing and certified copy fees.

Thank you for your assistance in this matter. If you have any questions, please let us know.

Sincerely,

THE PERMENTER LAW FIRM, P.A.

Andrea M. Muratore, FRP
Florida Registered Paralegal to

Tommy D. Permenter, Jr., Esquire

AM Enclosures

# **COVER LETTER**

Division of Corporations	
SUBJECT: Citrus Laundry LLC	
(Name of Re	esulting Florida Limited Company)
The enclosed Articles of Conversion, Arti Business Entity" into a "Florida Limited I	cles of Organization, and fees are submitted to convert an "Other Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerni-	ng this matter to:
Tommy D. Permenter, Jr., Esquire	<u> </u>
(Contact Person)	
The Permenter Law Firm, P.A.	
(Firm/Company)	
2201 S.E. 30th Avenue, Suite 202	2
(Address)	
Ocala, Florida 34471	
(City, State and Zip Code)	<del>-</del>
Tommy@Permenterlaw.com	
E-mail Address: (to be used for future annual i	report notifications)
For further information concerning this m	atter, please call:
Tommy D. Permenter, Jr., Esquire	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the	ount: (All checks processed by this office must be payable in US : United States)
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy  Certified Copy, and Certificate of Status
Mailing Address:	Street Address:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations The Centre of Tallahassee
P.O. Box 6327 Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
, and and a second a	Tallahassee, FL 32303

TO: New Filing Section

### **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 linting" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, finited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of [Florida] (Enter state, or if a non-U.S, entity, the name of the country)
(Enter state, or if a non-U.S, entity, the name of the country)
February 10, 2017 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:
Citrus Laundry 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.

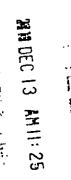
Signed this day of December	20_19
Signature of Authorized Representative of Lim	ited Viability Company:
Signature of Authorized Representative: Printed Name: Matthew D. Nichols, Sr.	Title: Manager
Signature(s) on behalf of Other Business Entiry:	Sec below for required signature(s)
Signature:	Title: President
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	TRIC:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Citrus Laundry LLC			
(8)	lust contain the words "Limited I	iability Company, "L.L.C.," or "LLC.")	
ARTICLE H - A The mailing addro		he principal office of the Limited Liability Company	
Principal Office Address:		Mailing Address:	
923 N. Magnolia Ave	rnue	923 N. Magnofia Avenue	
Suite 402	· · · · · · · · · · · · · · · · · · ·	Suite 402	
Ocala, Florida 34475		Ocala, Florida 34475	
(The Limited Liability C business entity with an		tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:	
(The Limited Liability C business entity with an	Company cannot serve as its own active Florida registration.)	Registered Agent. You must designate an individual or another	
(The Limited Liability C business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of  Matthew D. Nichols, Sr.	Registered Agent. You must designate an individual or another	
(The Limited Liability C business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of  Matthew D. Nichols, Sr.	Registered Agent. You must designate an individual or another the registered agent are:	
(The Limited Liability C business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of   Matthew D. Nichols, Sr.  923 N. Magnolia Avenue, 8	Registered Agent. You must designate an individual or another the registered agent are:	
(The Limited Liability C business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of Matthew D. Nichols, Sr.  923 N. Magnolia Avenue, 8  Florida street address  Ocala	Registered Agent. You must designate an individual or another the registered agent are:  Name Suite 402 (P.O. Box NOT acceptable)  F1, 34475	
(The Limited Liability C business entity with an	Company cannot serve as its own active Florida registration.)  Florida street address of Matthew D. Nichols, Sr.  923 N. Magnolia Avenue, S.  Florida street address	Registered Agent. You must designate an individual or another the registered agent are:  Name Suite 402  (P.O. Box NOT acceptable)	

(CONTINUED)

Registered Agent's Signature (REQUIRED)



### 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	
MGR	Matthew D. Nichols, Sr.
	923 N. Magnolia Avenue, Suite 402
	Ocala, Florida 34475
<del></del>	
-	
(Use attachment if necessary)	
<b></b>	
CLE V: Other provisions, if any.	
	1
REQUIRED SIGNATURE:	
- CHELLAND	
Signature of a member or a	in authorized representative of a member
This document is executed in accordance and false information submitted in a document	with section 605.0203 (1) (b). Florida Statutes, I am aware tha nent to the Department of State constitutes a third degree felon
as provided for in s.817.155, F.S.	near to the Department of State constitutes a third degree feion
Matthew D. Nichols, Sr.	
713	ped or printed name of signee

Filing Fees
S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)