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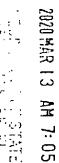
| (Requ | iestor's Name) | |
|----------------------------|-----------------|-------------|
| - (Addı | ess) | |
| (Adda | ess) | |
| (City/s | State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busin | ness Entity Nam | ne) |
| (Docu | ıment Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to Fi | ling Officer: | |
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Office Use Only



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COVER LETTER

| TO: New Filing Section Division of Corporations | | |
|---|--|--|
| SUBJECT: Shadow Trailers, | LLC | |
| | sulting Florida Limited Cor | npany) |
| The enclosed Articles of Conversion, Articles usiness Entity" into a "Florida Limited L | | |
| Please return all correspondence concerning | g this matter to: | |
| Tommy D. Permenter, Jr., Esquire | | |
| (Contact Person) | | |
| The Permenter Law Firm, P.A. | | |
| (Firm/Company) | | |
| 2201 S.E. 30th Avenue, Suite 202 | | |
| (Address) | | |
| Ocala, Florida 34471 | | |
| (City, State and Zip Code) | | |
| Tommy@Permenterlaw.com | | |
| E-mail Address: (to be used for future annual re | port notifications) | |
| For further information concerning this ma | tter, please call: | |
| Tommy D. Permenter, Jr., Esquire | | 2-1811 |
| (Name of Contact Person) | (Area Code) (Day | time Telephone Number) |
| Enclosed is a check for the following amoudollars and drawn on a bank located in the | | sed by this office must be payable in US |
| ☐ \$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 | ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status |
| Mailing Address: | | Address: |
| New Filing Section Division of Corporations | | Filing Section ion of Corporations |
| P.O. Box 6327 | | entre of Tallahassee |
| Tallahassee, FL 32314 | 2415 | N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

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:

Shadow Trailers, Inc.

| | (Enter Name of Other Business Entity) |
|--|--|
| 2. The "Other Business E | ntity" is a Corporation Example: corporation. limited partnership, general partnership, common law or business trust, etc. |
| (Enter entity typ | :. 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) |
| February 11, 2003 | |
| on February 14, 2003 (date of organization, form | ation or incorporation) |
| 3. The name of the Florid | a Limited Liability Company as set forth in the attached Articles of Organization: |
| Shadow Trailers, LLC | |
| (1: | nter Name of Florida Limited Liability Company) |
| 4. If not effective on the o | ate of filing, enter the effective date: |
| (The effective date: Canr the date this document is | iot be prior to date of receipt or filed date nor more than 90 calendar days after s filed by the Florida Department of State.) |
| | s block does not meet the applicable statutory filing requirements, this date will not be listed as the e Department of State's records. |
| 5. The plan of conversion | has been approved in accordance with all applicable statutes. |
| | Business Entity" has agreed to pay any members having appraisal rights the amount to entitled under ss. 605.1006 and 605.1061-605.1072, F.S. |

| Signed this 11th day of Mar | 20 <u>20</u> . |
|---|---|
| • | entative of Limited Liability Company: |
| Signature of Authorized Represen | itative: lange - t |
| Printed Name: Larry R. Pruitt | Title: Manager |
| Signature(s) on behalf of Other B | Business Entity: [See below for required signature |
| Signature: Lann 12-1 | Y |
| Printed Name: Larry R. Pruitt | Title: President |
| | |
| Signature: Printed Name: | Title: |
| | |
| Signature: | Title: |
| Timed Name. | Title. |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| If Florida General Partnership or Signature of one General Partner. | en selected, an Incorporator must sign. r Limited Liability Partnership: r Limited Liability Limited Partnership: |
| All others: | |
| Signature of an authorized person. | |
| Fees: | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | |
|--|--|
| The name of the Limited Liability Con | npany is: |
| Shadow Trailers, LLC | |
| | ited 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: |
| 951 S.W. 21st Place | 951 S.W. 21st Place |
| Williston, Florida 32696 | Williston, Florida 32696 |
| | |
| Larry R. Pruitt | |
| Tany N. Hunt | Name |
| | |

Name

951 S.W. 21st Place

Florida street address (P.O. Box NOT acceptable)

Williston F1, 32696

City 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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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 | Larry R. Pruitt |
| | 11860 N.W. 160th Avenue |
| | Morriston, Florida 32668 |
| | |
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| CLE V: Other provisions, if any. | |
| | |
| REQUIRED SIGNATURE: | |
| 1 | Dit |
| Larry | |
| Signature of a member of This document is executed in accordance | r an authorized representative of a member |
| Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. | |
| Signature of a member of This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. Larry R. Pruitt | r an authorized representative of a member ce with section 605.0203 (1) (b). Florida Statutes, I am aware th |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)