# L20000114090

(	Requestor's Name)	
(	Address)	
(.	Address)	
. (6	City/State/Zip/Phone #	r)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name	)
([	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer;	
	Office Use Only	

with



000343843470

04/27/20--01023--018 \*\*185.00

2020 APR 27 PH 4: 49

K Brumbley

**Registration Section** 

**Division of Corporations** 

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

RE: Filing Articles of Conversion

TAH2, LLC

Dear Sir or Madam:

Attached for filing please find the Articles of Conversion of the above-referenced corporation. Enclosed, please find a check for \$185 for the Filing Fee, Certified Copy and Certificate of Status. Please process this application as quickly as possible and send the filed copy to me at the address below:

TAH2, Inc.

928 Sycamore Street

Daytona Beach, FL 32114

If you have any questions, please call me at (386) 631-0350. Thank you for your help in this matter.

Thomas A. Huge

TAH2, Inc.

### **COVER LETTER**

TO: New Filing S Division of C			
SUBJECT: TAH2, L	LC		
		ulting Florida Limit	led Company)
The enclosed Article Business Entity" into	s of Conversion, Artic o a "Florida Limited Li	les of Organization	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:	
Thomas A. Huger			
	(Contact Person)		-
TAH2, Inc			
	(Firm/Company)		
928 Sycamore Street			
	(Address)		•
Daytona Beac, FL 321	14		
(1	City, State and Zip Code)		
tahuger@yahoo.com			
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this mat	ter, please call:	
Thomas A. Huger		_at (	<sub>3</sub> 631-0350
(Name of Conta	ct Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check f dollars and drawn on	or the following amou a bank located in the l	nt: (All checks pi United States)	rocessed 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 I and Certified Copy	
Mailing Add New Filing So			Street Address: New Filing Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

# **Articles of Conversion**

For

## "Other Business Entity"

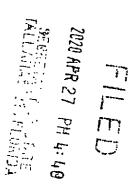
Into

### 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: TAH2, 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, e	tc.)
First organized, formed or incorporated under the laws of FL (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)	
05/04/2011 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 TAH2, 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.	r
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 22 day of ApiZIL	20_7-0
Signature of Authorized Representative of Limi	_
$\mathbb{N}$	41.
Signature of Authorized Representative:	
Printed Name: Thomas A. Huger	1 Tille: VA
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
With	
Signature:	
Printed Name: Thomas A Huger	Title: VP
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Company, "L.L.C.," or "LLC.")
Company, tanken of taken,
ncipal office of the Limited Liability Company is:
Mailing Address:
928 Sycamore Street
Daytona Beach, FL 32114
Office, & Registered Agent's Signature: red Agent. You must designate an individual or another egistered agent are:
gistered agent are.
Box NOT acceptable)
FL <sup>32114</sup>
Zip
accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S

### 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	000 0 01
Thomas A. Huger, AMBR	928 Sycamore Street
	Daytona Beach, FL 32114
Linda G. Huger, AMBR	928 Sycamore Street
	Daytona Beach, FL 32114
<del></del>	
(Use attachment if necessary)	
(ose acaemient if necessary)	
FICLE V: Other provisions, if any.	
<u>REQUIRED</u> SIGNATJURF: \	
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
as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree felony
·	
Thomas A. Huger	ped or printed name of signee
Ty	Filing Fees
	rining rees

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