# L20000 357576

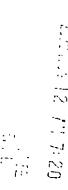
(Red	questor's Name)	
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DDA)	dress)	
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(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Eiling Officer	
Special instructions to i	rilling Officer.	

Office Use Only



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#### **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: Copy Products Company, LLC			
(Name of Re	sulting Florida Limit	ed Company)	
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	•		
Please return all correspondence concernin	g this matter to:		
Van P. Geeker			
(Contact Person)			
Emmanuel, Sheppard & Condon			
(Firm/Company)			
195 Grand Boulevard, Suite 101			
(Address)			
Miramar Beach, FL 32550			
(City, State and Zip Code)			
dard@cpctek.com			
E-mail Address: (to be used for future annual re	port notifications)		
For further information concerning this ma	tter, please call:		
Van P. Geeker	at (850	460-8000	
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amou dollars and drawn on a bank located in the	int: (All checks p United States)	rocessed by this office must be p	ayable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\square{1}\$\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop	y Certified Copy, and Certificate of Status	12 /11 7:20
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 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.

Copy Products Company (Enter Name of Other B	Susiness Entity)
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limi	ted partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the la	rws of
02/07/1989	
(date of organization, formation or incorporation)	
•	any as set forth in the attached Articles of Organization:
Copy Products Company, LLC	
(Enter Name of Florida Limited	Liability Company)
	Diam'ny Company
the date this document is filed by the Florida De	cective date:  ceipt or filed date nor more than 90 calendar days after partment of State.)  icable statutory filing requirements, this date will not be listed as the
(The effective date: Cannot be prior to date of re the date this document is filed by the Florida De Note: If the date inserted in this block does not meet the appl	ceipt or filed date nor more than 90 calendar days after partment of State.) icable statutory filing requirements, this date will not be listed as the ls.

<i>(</i> 11)		$_{20}\mathcal{H}_{\underline{}}$		
Signati	re of Authorized Representative of Lim	ited Liability Company:		
	re of Authorized Representative:			
Signatu	re of Authorized Representative:	CT WOLL		
Printed	Name: R. Roger Wallace	Title: Manager		
<u>Signatu</u>	re(s) on behalf of Other Business Entity:	[See below for required signature(s	s)	
Signatu	re: X Name: R. Roger Wallace	Tid Procident		
Signatu	e: Name:	erval	_ <del>_</del>	
Printed	Name:	Title:		
Signatu	e:			
Printed	ve: Name:	Title:		
Signatui	re:			
Printed	e: Name:	Title:	<del></del>	
Signatu	re:Name:			
Printed	Name:	Title:		
Signatur	e:		<del></del>	
Signatur Printed	e: Name:	Title:	<del></del>	
	e:	Title:	<del></del>	
<u>If Flori</u> Signatui	<u>la Corporation:</u> e of Chairman, Vice Chairman, Director, or	Officer.	<del></del>	
<u>If Flori</u> Signatui	la Corporation:	Officer.		
<u>If Flori</u> Signatui If Direct <b>If Flori</b>	la Corporation: e of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an In	Officer. acorporator must sign.		
<u>If Flori</u> Signatui If Direct <b>If Flori</b>	la Corporation: e of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an In	Officer. acorporator must sign.		
If Florio Signatur If Direct If Florio Signatur	la Corporation: e of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an In	Officer. ecorporator must sign. ity Partnership:		
If Florid Signatur If Direct If Florid Signatur	la Corporation: The of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an Included Liability of the General Partnership or Limited Liability of the General Partner.	Officer. ecorporator must sign. ity Partnership:		
If Florid Signatur If Direct If Florid Signatur	la Corporation: e of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an In la General Partnership or Limited Liabili e of one General Partner. la Limited Partnership or Limited Liabili es of ALL General Partners.	Officer. ecorporator must sign. ity Partnership:	<u></u>	
If Florid Signatur If Direct If Florid Signatur If Florid Signatur	la Corporation: e of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an In la General Partnership or Limited Liabili e of one General Partner. la Limited Partnership or Limited Liabili es of ALL General Partners.	Officer. ecorporator must sign. ity Partnership:	7-10.	
If Florid Signatur If Direct If Florid Signatur All othe Signatur	la Corporation: e of Chairman, Vice Chairman, Director, or cors or Officers have not been selected, an In la General Partnership or Limited Liabili e of one General Partner. la Limited Partnership or Limited Liabili es of ALL General Partners. rs:	Officer. ecorporator must sign. ity Partnership:	7-121	
If Florid Signatur If Direct If Florid Signatur All othe Signatur Fees:	la Corporation: e of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an In la General Partnership or Limited Liabili e of one General Partner. la Limited Partnership or Limited Liabili es of ALL General Partners.  rs: e of an authorized person.	Officer. acorporator must sign. aity Partnership: aity Limited Partnership:	2.1.2	
If Florid Signatur If Direct If Florid Signatur All othe Signatur All othe Signatur	la Corporation:  e of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an In  la General Partnership or Limited Liability of one General Partner.  la Limited Partnership or Limited Liabilities of ALL General Partners.  rs: c of an authorized person.	Officer, acorporator must sign.  ity Partnership:  ity Limited Partnership:  \$25.00	7-1-7-1	
If Florid Signatur If Direct If Florid Signatur All othe Signatur Fees:	la Corporation: e of Chairman, Vice Chairman, Director, or ors or Officers have not been selected, an In la General Partnership or Limited Liabili e of one General Partner. la Limited Partnership or Limited Liabili es of ALL General Partners.  rs: e of an authorized person.	Officer. acorporator must sign. aity Partnership: aity Limited Partnership:	7-1-7-1	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Copy Products Company, LLC		<del></del>
(Must contain the words "Limited Liabili	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pa	rincipal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
910 E. Cervantes Street	910 E. Cervantes Street	
Pensacola, FL 32501	Pensacola, FL 32501	
The name and the Florida street address of the R. Roger Wallace  Name		
910 E. Cervantes Street		
Florida street address (P.O		
Pensacola	FL 32501	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and complete accept the obligations of my position as registered Agent's Signature.	this certificate, I hereby accept the ity. I further agree to comply with performance of my duties, and I awaistered agent as provided for in C	he appointment as n the provisions of all n familiar with and
(CONTIN	UED)	

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	R. Roger Wallace
	910 E. Cervantes Street
	Pensacola, FL 32501
MGR	David Ard
	910 E. Cervantes Street
	Pensacola, FL 32501
(Use attachment if necessary)	
(Use attachment if necessary)  ICLE V: Other provisions, if any.	
ICLE V: Other provisions, if any.	
REQUIRED SUSNATURE:	
REQUIRED SENATURE:  Signature of a member or This document is executed in accordance.	
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware that unent to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document is executed in a coordance as provided for in s.817.155, F.S.  R. Roger Wallace	e with section 605.0203 (1) (b), Florida Statutes. I am aware that