# (2000) 30 PA

(Requestor's Name)
(Address)
(Address)
· · · · ·
(City/State/Zip/Phone #)
(Only/Olate/21ph Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
ertified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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2020 NOV 17 PH 10: 58

### **COVER LETTER**

Division of C	orporations			
SUBJECT: Champio	n Bin Cleaning, LLC			
30bJEC1	(Name of Res	ulting Florida L	imited Cor	npany)
	•	•		nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter t	o:	
Shawn L. Oliver				
<del> </del>	(Contact Person)			
Champion Bin Cleanin	g			
	(Firm/Company)			
3567 Grande Reserve	Way Apt. 111			
	(Address)		<del></del>	
Orlando, Florida 32837	•			
((	City, State and Zip Code)			
service@championbine	cleaning.com			
E-mail Address: (to be	e used for future annual re	port notification	s)	
For further information	on concerning this ma	tter, please ca	11:	
Shawn L. Oliver		at ( 804	6514	6180
(Name of Conta	ct Person)	(Area Co	ode) (Day	6180 /time Telephone Number)
	or the following amou a bank located in the	nt: (All check	s process	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 Fill and Certified		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Addi				t Address:
New Filing Se				Filing Section
Division of Control P.O. Box 632	<del>-</del>			ion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section

## **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 Article Champion Bin Cleaning	es of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Limited Liability Company	
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	n law or business trust, etc.)
First organized, formed or incorporated under the laws of	a
(Enter state, or if a non-U.S. entity, the	name of the country)
18 February 2019	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	cles of Organization:
Champion Bin Cleaning, 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 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 document's effective date on the Department of State's records.	0 calendar days after
	20
5. The plan of conversion has been approved in accordance with all applicable statutes.	2020 NOV
6. The "Converted or Other Business Entity" has agreed to pay any members having apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	al rights the amount to
	PH 10: 58

Signed th	nis <u>10</u>	_ day of <u>November</u>	20 <u></u>
C' .	6 4 . 41	: I D 4-4' 6 I '	- A. J. I. S. L. West Community
		rized Representative of Lin	
Signature	of Authori	zed Representative:	
Printed N	ame: Shawn	L. Oliver	Title: Owner
Signatur	e(s) on beha	alf of Other Business Entity	[See below for required signature(s)]
Signature	e a	es olin	
Printed N	ame: Princes	ss Oliver	Title: Owner
Signature	:		Title:
Printed N	ame:		Intle:
Signature	:		
Printed N	ame:		Title:
Signature	:		Title:
Printed N	ame:		riue:
Signature	:		
Printed N	ame:		Title:
rinica iv	ame		Title:
If Florida	a Corporati	on:	
		n, Vice Chairman, Director, o	
If Directo	ors or Office	rs have not been selected, an	ncorporator must sign.
If Florida	a Canaral P	artnership or Limited Liab	ility Partnarchin
	of one Gene		mity I artifer surp.
Ü			
		artnership or Limited Liab	lity Limited Partnership:
Signature	s of <u>ALL</u> G	eneral Partners.	
All other	s:		
		rized person.	
_			
Fees:			
Λ	rticles of Co	anversion:	\$25.00
		da Articles of Organization:	
	ertified Cop	•	\$30.00 (Optional)
	ertificate of		\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE I - Name:</b> The name of the Limited Liability Company is	:
Champion Bin Cleaning, L.L.C	
(Must contain the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3567 Grande Reserve Way	3567 Grande Reserve Way
Apt. 111	Apt. 111
Orlando, Florida 32837	Orlando, Florida 32837
The name and the Florida street address of the  Shawn L. Oliver  Name	
3567 Grande Reserve Way, A Florida street address (P.O.	<del></del>
Orlando	<del></del> · · ·
	FL 32837
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S

(CONTINUED)

### **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	
AMBR	Shawn L. Oliver
	3567 Grande Reserve Way, Apt. 111
	Orlando, Florida 32837
AMBR	Princess Oliver
	3567 Grande Reserve Way, Apt. 111
	Orlando, Florida 32837
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	r <u>~</u>
<del></del>	20
	20
	17
	2)20 NOV 17 PH 10:
	<del> </del>
(Use attachment if necessary)	: 55 CB
CLE V: Other provisions, if any.	
*	·
REQUIRED SIGNATURE:	
D M	

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Shawn L. Oliver

Typed 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)