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(Requestor's Name)		
(Address)		
(Address)		
(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
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Office Use Only



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COVER LETTER *

TO: New Filing Section Division of Corporations
SUBJECT: /OWNSEND PhotogRAPhics LLC (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
TERRY L. TOWNSEND (Contact Person)
(Firm/Company)
3209 DOVER ROAD (Address)
pompano Brach, FL 3306 Z (City, State and Zip Code)
F-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 260-8170 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$\frac{1}{2}\$\$ \$150.00 Filing Fees

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 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.

5. The plan of conversion has been approved in accordance with all applicable statutes.

the date this document is filed by the Florida Department of State.)

document's effective date on the Department of State's records.

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.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signature of Authorized Representative: Printed Name: Terry L. Territory Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Terry L. Territory Signature: Printed Name: Title: Signature: Printed Name: Signature: Printed Name: Signature Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: # 4788 J. Articles of Conversion: S25.00 # 4787 Fees for Florida Articles of Organization: S125.00	Signed this 22 day of DECEMBER	20 ZO .
Signature: Printed Name: Printed Name: Printed Name: Printed Name: Printed Name: Printed Name: Signature: Printed Name: Printed Name: Title: Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:		
Signature: Printed Name: Finted Name: Finted Name: Title:	Signature of Authorized Representative: ///// Printed Name: TERRY < TOWNSEND	Tile: president, MGB
Signature: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: #4788 J Articles of Conversion: S25.00	Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: #4788 J Articles of Conversion: S25.00	Signature: IMW 1	
Signature: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: #4788 J Articles of Conversion: S25.00	Printed Name: TERY L. Town EN	Title: PRESIDENT
Signature: Printed Name: Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: #4788	,	•
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Signature of an authorized person. Fees: #4788 \[\] Articles of Conversion: \$25.00	· · · · · · · · · · · · · · · · · · ·	ty Limited Partnership:
#4788 J Articles of Conversion: \$25.00		
#4788 \(\text{Articles of Conversion:} \) # 4787 \(\text{Fees for Florida Articles of Organization:} \) \$25.00	Fees:	
Certified Copy: \$30.00 (Optional) Certificate of Status: \$5.00 (Optional)	# 4787 ✓ Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
TownsEND photog. (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of t	he Limited Liability Company is:
Principal Office Address:	Mailing Address:
BOMPANO BEACH FL 33062	JOUR DOVER RUAD - POMPANO BEACH, FL 33062
ARTICLE III - Registered Agent, Registered Office, & Regis (The Limited Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent at	e:
TERRY L. TO Name	WNSEND
3209 NOVEA Florida street address (P.O. E	
DOMPANO BEACH City Su	FL 33062 atc 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	TERRY L. TONNSEND 3209 BOVER ROAD POUT PANO BEACH, FL 3306Z
(Use attachment if necessary)	
the date of filing.)	of filing: <u>JANUARY / 2021</u> . (OPTIONAL) reflice and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed as of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	7. <u>f</u>
This document is execut I am aware that any false constitutes a third degree	poter or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State efclony as provided for in s.817.155, F.S. Rey L. Town SEND Typed or printed name of signee
	., , , , , , , , , , , , , , , , , , ,

4787 S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)