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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Dusinoss Linky Name)			
(Dagweggt Musel es)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
<u></u>			

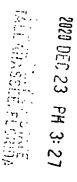
Office Use Only

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JAN 1 5 2021



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COVER LETTER

TO:	New Filing Se	ection	·, '	F 25	*		
	Division of Co						
SUBJ	ECT: D&SLO	GGING, INC.					
		(Name of Res	ulting Florida Lim	ited Con	npany)		
					d fees are submitted to corcordance with s. 605.104:		
Please	e return all corre	espondence concernin	g this matter to:				
LAUR	A C. PYNE, ESQ	l .					
		(Contact Person)		_			
PYNE	LAW GROUP, P	P.A.					
		(Firm/Company)					
2309	FRANKFORD AV	'ENUE					
		(Address)		_			
PANA	MA CITY, FLOR	DA 32405					
	((City, State and Zip Code)					
LAUR	APYNE@PYNEL	AWGROUP.COM					
E-1	nail Address: (to be	e used for future annual re	port notifications)	_			
For fi	irther informatio	on concerning this ma	tter, please call:				
LAUR	A C. PYNE		_at (⁸⁵⁰	215-9	9090		
	(Name of Contac	ct Person)	(Area Code	e) (Day	time Telephone Number)		
		or the following amou a bank located in the		process	sed by this office must be p	payable in US	
(\$25 fc & \$12:	50.00 Filing Fees or Conversion 5 for Articles anization)	■\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	2020 DEC	
	Mailing Addr New Filing Se Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 81 nassee, FL 32303	23 PH 3:	

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

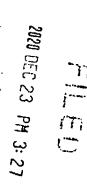
The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: D & S LOGGING, 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, etc.)
(Enter entity type. 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)
01-14-1997 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:
D & S LOGGING, 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 after 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.
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

P9700003868

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.



Signed this 18TH day of DECEMBER	_ 20 <i>_2</i> 0
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	un Sil M
Printed Name: JAMES D. MORRIS	Title: MANAGÉR
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Dame James D. MORRIS	
Printed Name: JAMES D. MORRIS	Title: DIRECTOR
Cionatura	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	0.m
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer.
if Directors of Officers have not been selected, an inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability	ty Limited Partnership:
Signatures of ALL General Partners.	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Certified Copy: Certificate of Status: 2020 DEC 23 PH 3: 27

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
D & S LOGGING, LLC	
(Must contain the words "Limited Liability Co	ompany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
261 HIGHWAY 273	261 HIGHWAY 273
CHIPLEY, FLORIDA 32428	CHIPLEY, FLORIDA 32428
The name and the Florida street address of the region CHERYL E. MARTIN Name 261 HIGHWAY 273	
Florida street address (P.O. B	 ,
CHIPLEY	FL ³²⁴²⁸
City	Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per accept the obligations of my position as registed.	ccept service of process for the above stated limited its certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 605, F.S ure (REQUIRED)

(CONTINUED)

PIL ED

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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	JAMES D. MORRIS
	261 HIGHWAY 273
	CHIPLEY, FLORIDA 32428
MGR	REX D. TAYLOR
	261 HIGHWAY 273
	CHIPLEY, FLORIDA 32428
	
	
(Use attachment if necessary)	
(ose ameniment in necessary)	
TICLE V: Other provisions, if any.	
Total Trouble provisions, it uny.	
REQUIRED SIGNATURE:	
Jame 2006	
	
3 1 . 4 .	

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 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.

JAMES D. MORRIS

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)