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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

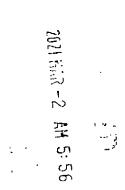
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 10, 2020

SAMUELL LEPRELY

1930 SAN MARCO BLVD STE 201 JACKSON WITE FI 82207

SUBJECT: NATIONAL SITE MATERIALS COMPANY, LLC

Ref. Number: W20000140238

We have received your document for NATIONAL SITE MATERIALS COMPANY, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The second page of the articles of conversion is missing, with the required signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 720A00024821

COVER LETTER

TO:	New Filing S Division of 0	Section Corporations			
SUBJ	ECT: Nationa	ıl Site Materials Compar	ny, LLC		
			sulting Florida Lim	ited Co	тралу)
The er Busine	nclosed Article	es of Conversion, Artico a "Florida Limited L	cles of Organization	tion, ar	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	return all con	respondence concernir	ng this matter to:		
Samue	el L. LePrell				
-		(Contact Person)			
Samue	el L. LePrell, Att	torney and Counselor at	Law		
		(Firm/Company)	7 = 4.0	_	
1930 \$	San Marco Blvd	., Suite 201			
		(Address)		_	
Jackso	nville, Florida 3	32207			
		City, State and Zip Code)		-	
samlep	rell@bellsouth.	net			
E-m	ail Address: (to b	oe used for future annual re	port notifications)	-	
For fur	ther informati	on concerning this ma	tter, please call:		
Sam Le	ePrell		904	390-	2705
	(Name of Conta	ect Person)	(Area Code)) (Day	2705 time Telephone Number)
Enclos dollars	ed is a check t and drawn on	or the following amou a bank located in the	ınt: (All checks p United States)	rocess	sed by this office must be payable in US
\$25 for \$\$125 t	.00 Filing Fees Conversion for Articles itzation)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
	Mailing Adda New Filing So Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		New I Divisi The C	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

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.

(Enter Name of Other Business Entity)	_'
2. The "Other Business Entity" is a corporation	
(Enter entity type. Example: corporation, limited partnership, general partnership, comm	on law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, th	e name of the country)
June 13, 2018 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Art	icles of Organization:
National Site Materials Company, 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 5 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 dat 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.	
 The "Converted or Other Business Entity" has agreed to pay any members having appraisal which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S. 	2021 HAR -2 AH
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Signed this 10th day of February, 2021	20
Signature of Authorized Representative of Lim	nited Liability Company:
Signature of Authorized Representative: Printed Name: John D. Arwood	Title: MGR
Signature(s) on behalf of Other Business Entity:	[See below-for required signature(s)]
Signature:	
Signature: Printed Name: John D. Arwood	Title: President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	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 In-	corporator must sign.
If Florida General Partnership or Limited Liabili	tv Partnerchin
Signature of one General Partner.	cy Laithership.
If Florida Limited Partnership or Limited Liabili	ty Limited Double auchie.
Signatures of ALL General Partners.	y tamited rarthership:
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Nam	e:		
The name of the Lir	nited Liability Compan	y is:	
	t contain the words "Limited Li	iability Company, "L.L.C.," or "	·Ll.C.")
ARTICLE II - Add The mailing address		ne principal office of the	Limited Liability Company is:
Principal Office Ac	idress:	Mailing Address	<u>:</u>
2997 Sunset Landing	Drive	2997 Sunset Landi	ing Drive
Jacksonville, Florida	32226	Jacksonville, Florid	
	Samuel L. LePrell	the registered agent are:	
	1930 San Marco Blvd, Su	rite 201	
-		P.O. Box NOT acceptal	ble)
	Jacksonville	FL 32207	
_	City	Zip	
liability compa registered agent a statutes relating	ny at the place designate nd agree to act in this-ea to the proper and compl gations of my position a	ed in this certificate, I her upacity—I-further-agree-to lete performance of my di	rocess for the above stated limited reby accept the appointment as o comply with the provisions of all luties, and I am familiar with and wided for in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-

as provided for in s.817.155, F.S.

John D. Arwood

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	John D. Arwood		
	2997 Sunset Landing Drive		
	Jacksonville, Florida 32226		
MGR	John C. Arwood		
	13255 Lanier Road		
	Jacksonville, Florida		
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		<u>9</u> d	
(Use attachment if necessary)		•	
FICLE V: Other provisions, if any.			
			<u> </u>
REQUIRED SIGNATURE:			
Signature of a member or a	in authorized representative of a member		
Signature of a member or a	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awa		

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)