L21000343007

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certificates of Status |
| Special Instructions to Filing Officer: IF Any froblems Please Carl Morthew (2) 954-868-1741 |

Office Use Only



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ALLAHASSEE. FLUNIU.

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RECEIVED 2021 JUL 28 ANIO: 05

COVER LETTER

| Division of C | orporations | | | |
|--|---|---|--|----------|
| SUBJECT: G | M Construct (Name of Res | ion Company pulting Florida Limited Con | of Florida L.P. | |
| The enclosed Article Business Entity" into | s of Conversion, Artic a "Florida Limited Li | les of Organization, an ability Company" in a | d fees are submitted to convert a secordance with s. 605.1045, F.S. | ın "Othe |
| Please return all corr | espondence concernin | g this matter to: | | |
| Matthew ! | D Murphy | | | |
| G&M Con | (Firm/Company) | | | |
| 8649 Coa | (Firm/Company) (Address) | | | |
| | (. 1001033) | | | |
| (" | City, State and Zip Code) | | | |
| MMurphy @ E-mail Address: (to b | GM - Constr be used for future annual re | 309 xtionCo.Corport notifications) | 7 | |
| For further informati | on concerning this ma | tter, please call: | | |
| Matthew D | Murphy | at (954) 8 | 68 - 1741 time Telephone Number) | |
| (Name of Cont | net Person) | (Area Code) (Day | rtime Telephone Number) | |
| | for the following amou a bank located in the | | sed by this office must be payab. | le in US |
| ☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | □\$155.00 Filing Fees and Certificate of Status | □\$180.00 Filing Fees and Certified Copy | ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status | |
| Mailing Add | | | t Address: | |
| New Filing S | | | Filing Section | |
| Division of C P.O. Box 632 | • | | ion of Corporations Centre of Tallahassee | |
| 1 37, 1703 (77) | | . 110 | · · · · · · · · · · · · · · · · | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section

PER JUL 28 AH 10: 05
SECRETALL OF STATE
VALUATIONSEE, FL

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: |
|---|
| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a <u>limited Partner Ship</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) |
| First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country) |
| on May 07, 2021 (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| G & M Construction Company of Florida LLC (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: 7/29/202 (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

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

| Signed this 28th day of July | _ 20 21 |
|---|--|
| Signature of Authorized Representative of Limi | ted Liability Company: |
| Signature of Authorized Representative: Match Printed Name: Matthew D Murphy | Title: UP / Gorden / Pirtner |
| Signature(s) on behalf of Other Business Entity: [| |
| Signature: Cregory Foley Printed Name: Gregory & Foley | Title: President/General Artner |
| 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 If Directors or Officers have not been selected, an Inc. | |
| If Florida General Partnership or Limited Liabili Signature of one General Partner. | ty Partnership: |
| If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. | ty Limited Partnership: |
| 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 I - Name: The name of the Limited Liability Company is: | |
|--|---|
| G & M Construction Compan (Must contain the words "Limited Liability Construction Compan) | company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the prin | ncipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 3330 Huntington Ave Mims, FL 32754 | PO Box 326 Scottsmoor, FL 32775 |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) | Office, & Registered Agent's Signature: red Agent. You must designate an individual or another? gistered agent are: |
| The name and the Florida street address of the re- | gistered agent are: |
| Gregory K For | (EV : |
| 7230 Grisson Florida street address (P.O. | |
| Cocoa | FL 32927 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)

| "AMBR" = Authorized Member | |
|--|--|
| "MGR" = Manager AMBR | Matthew D Murphy 8649 Coach Rc |
| | Tallahissee, FC 32309 |
| AMBR | Grea Foley |
| | 3330 Huntington Auc. |
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| (Use attachment if necessary) | |
| (Use attachment if necessary) | |
| | |
| (Use attachment if necessary) CLE V: Other provisions, if any. | |
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| | |
| CLE V: Other provisions, if any. REQUIRED SIGNATURE: | auch 2 - |
| CLE V: Other provisions, if any. REQUIRED SIGNATURE: Matthew J. M. | uphs |
| CLE V: Other provisions, if any. REQUIRED SIGNATURE: Masslus H M Signature of a member or | an authorized representative of a member |
| CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu | <i>'</i> |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document of a provided for in s.817.155, F.S. | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the Department of State constitutes a third degree felor |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document of a provided for in s.817.155, F.S. | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the Department of State constitutes a third degree felor |
| CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the Department of State constitutes a third degree felor |

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

Company: