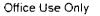
L21000531310

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





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2021 DEC 22 PH 2: 07

TALLOW USE ELECTROPA

PALLATIASSEES ATT

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 12/22/21

NAME: DIAMONDBACK HOIST & RIGGING, INC.

TYPE OF FILING: CONVERSION

COST:

150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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 DIAMONDBACK HOIST & RIGGING, INC.	y prior to the filing of the Articles of Conversion is:
(Enter Name of Other Busine	ss Entity)
2. The "Other Business Entity" is a Corporation Pe	9000101470
(Enter entity type. Example: corporation, limited pa	rtnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws o	f
(Enter state, or if a non-U.S. entity, the name of the country)
November 18, 1999	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company a	as set forth in the attached Articles of Organization:
DIAMONDBACK HOIST & RIGGING, LLC	
(Enter Name of Florida Limited Liabil	ity Company)
4. If not effective on the date of filing, enter the effective	e date:
(The effective date: Cannot be prior to date of receipt	
the date this document is filed by the Florida Department	
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been approved in accordar	ice with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to which such members are entitled under ss. 605.1006 and	



Signed this day of December	20
Signature of Authorized Representative of Lim	
Signature of Authorized Representative: Printed Name: Richard D. Graham	chard Cyraham
Signature of Authorized Representative:	Tister Manager
Printed (Name: nichard D. Granam	[][[e: wanage]
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
	[See below for required signature(s)]
Signature: Kichard Czraham	
Printed Name: Richard D. Graham	Title: Director/Officer
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	· · · · · · · · · · · · · · · · · · ·
Printed Name:	Title:
0.	
Signature:	ent d
Printed Name:	little:
Ciamaturas	
Signature: Printed Name:	Tisles
Fillited Ivanic.	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In	
	octporato: mast sig
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
_	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Autialog of Companion	\$25.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Li	ability Company is:		
DIAMONDBACK HOIST & RI			
(Must contain t	he words "Limited Liability	Company, "L.L.C.," or "LLC	.")
ARTICLE II - Address: The mailing address and str	eet address of the pri	ncipal office of the Lir	mited Liability Company is:
Principal Office Address:		Mailing Address:	
806 Lakeshore Drive		806 Lakeshore Drive	
Polk City, FL 33868		Polk City, FL 33868	
806 Lake	la registration.) Treet address of the re D. Graham Name eshore Drive	gistered agent are:	2021 DEC 22
	,	Box NOT acceptable)	
Polk City		FL 33868	
	City	Zip	_
liability company at the registered agent and agree statutes relating to the pi accept the obligations	e place designated in e to act in this capaci roper and complete p	this certificate, I hereby ty. I further agree to co erformance of my dutie istered agent as provide	ess for the above stated limited accept the appointment as emply with the provisions of all s, and I am familiar with and ed for in Chapter 605, F.S

(CONTINUED)

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

HANDDH - A. AlII NoI	
"AMBR" = Authorized Member "MGR" = Manager	
MGR — Manager	Richard D. Graham
	806 Lakeshore Drive
	Polk City, FL 33868
	
(Use attachment if necessary)	
(Ose attachment if necessary)	
LE V: Other provisions, if any.	
,	
REQUIRED SIGNATURE:	
	chard Caraham
	chard Graham
	chard Cyrcham
Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware the
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 the
Signature of a member or This document is executed in accordance any false information submitted in a document as 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 the
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S. Richard D. Graham, Manager	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware the ament to the Department of State constitutes a third degree felo
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S. Richard D. Graham, Manager	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)