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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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DIVISION OF CORFORATIONS TALLAHASSEE, FLORIDA

RECEIVED

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.

Signed this 10 th day of 17 kg.	20?, <i>)</i>		
Signature of Authorized Representative of Lim	nited Liability Company:		
Signature of Authorized Representative: 4000 Printed Name: 40000 Highs	Title: CEO	_	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature: Name:	Title:	<u>-</u> -	
Signature: 1\O(\E) Printed Name:	Title:	_ 	
Signature: <u>(\O\e)</u> Printed Name:	Title:	_ _	
Signature: _\(\cappa_i	Title:	_ 	
Signature: Printed Name:	Title:	<u>-</u>	
Signature: NONE Printed Name:	Title:	<u>. </u>	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir			
If Florida General Partnership or Limited Liabil Signature of one General Partner.	lity Partnership:		
If Florida Limited Partnership or Limited Liabil Signatures of <u>ALL</u> General Partners.	ity Limited Partnership:		
All others: Signature of an authorized person.			
<u>Fees:</u>		• •	202
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	•	6221111 12 M

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Freedom	on Enterprise of Tust contain the words "Limited Liab	Texas L.L.C.," or "LLC.")	
ARTICLE II - Ac		principal office of the Limited Liabili	ty Company is:
Principal Office A	Address:	Mailing Address:	
7037 Mark	<u>St</u>	P.O. Box bobsi Jacksonville, FL 33	
ARTICLE III - R (The Limited Liability C business cutity with an	egistered Agent, Register ompany cannot serve as its own Regactive Florida registration.)	ed Office, & Registered Agent's Sig	nature:
ARTICLE III - R (The Limited Liability C business cutity with an	egistered Agent, Register ompany cannot serve as its own Regactive Florida registration.) Florida street address of the	ed Office, & Registered Agent's Sig gistered Agent. You must designate an individual of the registered agent are:	nature: or anoth er
ARTICLE III - R (The Limited Liability C business cutity with an	legistered Agent, Register ompany cannot serve as its own Regactive Florida registration.) Florida street address of the Georgia Hicks	ed Office, & Registered Agent's Sig gistered Agent. You must designate an individual of e registered agent are:	nature: or anoth er
ARTICLE III - R (The Limited Liability C business cutity with an	Registered Agent, Register ompany cannot serve as its own Regactive Florida registration.) Florida street address of the Georgia Hicks National Towns of the National Property of the National Prop	ed Office, & Registered Agent's Sig gistered Agent. You must designate an individual of e registered agent are:	nature: or another
ARTICLE III - R (The Limited Liability C business cutity with an	Registered Agent, Register ompany cannot serve as its own Regactive Florida registration.) Florida street address of the Georgia Hicks National Today Mark Street address (P. Florida street address (P.	ed Office, & Registered Agent's Sig gistered Agent. You must designate an individual of the registered agent are:	nature: or anoth er

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>Fitle:</u> 'AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
	Georgia Hicks
	7037 Smark St.
	Jacksonville, FL 32210
Use attackment if necessary	
Use attachment if necessary)	
E V: Other provisions, if any.	
NEGRIDOR GIONATURE	
REQUIRED SIGNATURE:	
Designa Hicks.	
1	
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 aw
any false information submitted in a docu as provided for in s.817.155, F.S.	iment to the Department of State constitutes a third degre
•	
<u>Georgia Hicks</u>	/ped or printed name of signee
	ped or printed name of signee
` .\ Ty	Filing Fees