

(Requestor's Name) (Address) (Address)	200390462382		
(City/State/Zip/Phone #)	07/08/2201016010 ++180.00		
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
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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 prior to the filing of the Articles of Conversion is: Quality Services Rooting Inc.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a <u>Corporation</u> (Enter entity type, Example: corporation, limited partnership, general partnership, common law or business trust, etc.) Florida First organized, formed or incorporated under the laws of _____

(Enter state, or if a non-U.S. entity, the name of the country)

March 3, 2004 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

Quality Services Roofing LLC

(Enter Name of Florida Limited Liability Company)

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 which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

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Signed	this <u>5th</u>	_ day of <u>July</u>	_ 20_22	
<u>Signatı</u>	ire of Author	ized Representative of Linjit	ed Liability Company:	
Signatu	re of Authoriz	ed Representative:/iso	J-AE	
			_ Title: <u>Manager</u> See below for required signature(s)]	
Sienatu	re Miller	AL '		
Printed	Nam <u>g Jason D.</u>	Hise	_ Title: President	
Signatur Printed	re/ Name:		_Title:	
Signatur Printed	re: Name:		Title:	
Signatur Printed	re: Name:		Title:	
Signatur Printed	re: Name:		Title:	
Signatur Printed	re: Name:		Title:	
Signatu		<u>n:</u> , Vice Chairman, Director, or C ; have not been selected, an Inc		
	da General Pa re of one Gener	<u>rtnership or Limited Liabilit</u> ral Partner.	v Partnership:	
		<u>rtnership or Limited Liabilit</u> neral Partners.		
<u>All othe</u> Signatur	e <u>rs:</u> re of an authori	zed person.		
Fees:				
:	Articles of Co Fees for Floric Certified Copy Certificate of S	la Articles of Organization: /:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	2022 Jun
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Quality Services Roofing LLC

(Must contain the words "Limited Liability Company, "LL,C," or "LLC,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:	
2331 N.E. 18th Place	2331 N.E. 18th Place	
Ocala, Florida 34470	Ocala, Florida 34470	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

	Na	me
2331 N.E. 1	8th Place	
Florida s	treet address (P	.O. Box <u>NOT</u> acceptable)
Öcala		FL 34470
	City	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. Thereby accept the appointment as registered agent and agree to act in this capacity. Tfurther 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)

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ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager MGR Name and Address:

Jason D. Hise	
2331 N.E. 18th Place	
Ocala, Florida 34470	

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE: (0)a 5/1= 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 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. Jason D. Hise 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) ²⁰²² J. -∂ Fill2: 11