# L22000347012

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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#### **COVER LETTER**

TO: New Filing Secti Division of Corp					
SUBJECT: Ocean Bio-C	Chem, LLC				
		ılting Florida Limit	ed Comp	pany)	
		_		fees are submitted to converce cordance with s. 605.1045, F	
Please return all correspo	ondence concerning	this matter to:			
Butler.	Snow, LLF	)			
((	Contact Person)		•		
PO Box 1	Firm/Company)				
POBOX L	(Address)	158	•		
City,  KCKCZZCII (co  VE-mail Address: (to be use	State and Zip Code)  Newate  ed for future annual rep	Marine ort notifications)	arr	1	
For further information of	concerning this matt	er, please call:			
JUCK · CZZ J(Name of Contact Po	el1	at (678	541	-6301	
	he following amoun	nt: (All checks p		d by this office must be paya	ible in US
	\$155.00 Filing Fees d Certificate of atus	□\$180.00 Filing and Certified Cop	у	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	9 74 9
Mailing Address New Filing Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3	on orations		New Fi Division The Cent 2415 N	Address: ling Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810	<del>1.</del>

### **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.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Copean Bio-Chem, Inc.	onversion is:
	(Enter Name of Other Business Entity)	
2.	The "Other Business Entity" is a	
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or	business trust, etc.)
Fir	rst organized, formed or incorporated under the laws of	the country)
on	November 13, 1973	,,,
	(date of organization, formation or incorporation)	
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of	Organization:
Oc	cean Bio-Chem, LLC	
	(Enter Name of Florida Limited Liability Company)	
(T the <u>No</u>	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 calence date this document is filed by the Florida Department of State.)  tet: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no cument's effective date on the Department of State's records.	
5.	The plan of conversion has been approved in accordance with all applicable statutes.	2 2
6.	The "Converted or Other Business Entity" has agreed to pay any members having appraisal right which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	s the amount to
		S)

Signed this 9th day of August	_ 20_ 22
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:  Printed Name: Jack Ezzell	Frite: Authorized Representative
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: Jack Ezzell	
Printed Name: Jack Ezzell	Title: Secretary
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Sionature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	0.00
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
if Directors of Officers have not been selected, an in-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
Signatures of ALL General Faturers.	
All others:	
All others: Signature of an authorized person.	
Fees:	
Amialaa af Camuanian	\$25.00
Articles of Conversion:  Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLE II - Address: The mailing address and street address.  Principal Office Address:  4041 SW 47 Avenue Fort Lauderdale, Florida 33314  ARTICLE III - Registered Agent, Forth Company cannot serve as in business entity with an active Florida registration.  The name and the Florida street address.  Capitol Corporate  515 East Park Avenue Florida street address.  Tallahassee  Cite Having been named as registered as a liability company at the place december 1.	ss of the registered agent are:
ARTICLE II - Address: The mailing address and street address.  Principal Office Address:  4041 SW 47 Avenue Fort Lauderdale, Florida 33314  ARTICLE III - Registered Agent, Forth Company cannot serve as in business entity with an active Florida registration.  The name and the Florida street address.  Capitol Corporate  515 East Park Avenue Florida street address.  Tallahassee  Cit Having been named as registered as a liability company at the place decider.	Mailing Address:  4041 SW 47 Avenue Fort Lauderdale, Florida 33314  Registered Office, & Registered Agent's Signature: Is own Registered Agent. You must designate an individual or another  State of the registered agent are:
Principal Office Address:  4041 SW 47 Avenue  Fort Lauderdale, Florida 33314  ARTICLE III - Registered Agent, F (The Limited Liability Company cannot serve as i business entity with an active Florida registration.  The name and the Florida street address.  Capitol Corporate  515 East Park Avenue  Florida street address.  Tallahassee  Cit  Having been named as registered as liability company at the place de-	Mailing Address:  4041 SW 47 Avenue  Fort Lauderdale, Florida 33314  Registered Office, & Registered Agent's Signature: ss own Registered Agent. You must designate an individual or another) ss of the registered agent are:
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ARTICLE III - Registered Agent, F (The Limited Liability Company cannot serve as i business entity with an active Florida registration)  The name and the Florida street address Capitol Corporate  515 East Park Aven Florida street address Tallahassee  Cit Having been named as registered as liability company at the place de	Registered Office, & Registered Agent's Signature: as own Registered Agent. You must designate an individual or another and the registered agent are:
ARTICLE III - Registered Agent, F (The Limited Liability Company cannot serve as i business entity with an active Florida registration)  The name and the Florida street address Capitol Corporate  515 East Park Aven Florida street address Tallahassee  Cit Having been named as registered as liability company at the place de	Registered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another .) ss of the registered agent are:
The name and the Florida street addresses and the Florida street addresses East Park Average Florida street East Park Average Florida street East Park Park Park Park Park Park Park Park	s own Registered Agent. You must designate an individual or another .) ss of the registered agent are:
Florida street add  Tallahassee  Cit  Having been named as registered at liability company at the place de	Name
Florida street add  Tallahassee  Cit  Having been named as registered at liability company at the place de	
Florida street add  Tallahassee  Cit  Having been named as registered at liability company at the place de	Name
Tallahassee  Cit  Having been named as registered a	
Cit  Having been named as registered a	dress (P.O. Box <u>NOT</u> acceptable)
Having been named as registered a	FL 32301
liability company at the place de	zy Zip
statutes relating to the proper and	gent and to accept service of process for the above stated limited signated in this certificate. I hereby accept the appointment as this capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and ition as registered agent as provided for in Chapter 605, F.S
Registored A	gent's Signature (REQUIRED)
	(CONTINUED)

#### ARTICLE IV-

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	Philip Austin Singleton, Jr.	
	6275 Lanier Island Parkway	
	Buford, GA 30518	
<del></del>		
	<del></del>	
	<u></u>	
	<del></del>	
(Use attachment if necessary)		
LE V: Other provisions, if any.		
· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·		
REQUIRED SIGNATURE:		
KEOOIKED SIGNATURE.		
	<del></del>	
/_		
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 ment to the Department of State constitutes a third degree for	

Jack Ezzell, Authorized Representative

Typed or printed name of signee

Filing Fees

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