La300009439a

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
· · · · · · · · · · · · · · · · · · ·
Office Use Only





·	
---	--

FALLAHASSE	2023 MAR - J	RECE
•	PH	
		5
	~	

.

•

ı.

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date:

· .

L

. . . .

03/01/2023

Gir DW

Acc#I20160000072

Name:	AGRI - SOURCE, LLC	
Document #:		
Order #:	14808772	

Certified Copy of Arts	
& Amend:	
Plain Copy:	
Certificate of Good	
Standing:	
Certified Copy of	
Apostille/Notarial	Country of Destination:
Certification:	Number of Certs:

Filing:	Certified: 🖌	Email Address for Annual Report Notifications:
	Plain:	agrisourcel@aol.com
	COGS:	

Availability	
Document	Amount: \$ 185.00
Examiner	.
Updater	
Verifier	
W.P. Verifier	
Ref#	
	(Thank you!)

COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: Agri-Source, LLC

۰.

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605,1045, F.S.

Please return all correspondence concerning this matter to:

Kathryn P. Jones, Esq.

(Contact Person)

Baker & Hostetler, LLP

(Firm/Company)

200 S. Orange Ave., Suite 2300

(Address)

Orlando, Florida 32801

(City, State and Zip Code)

agrisource1@aol.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Kathryn P. Jones, Esq.	at (⁴⁰⁷)	649-4029
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

(\$25 for Conversion	□\$155.00 Filing Fees and Certificate of Status	S180.00 Filing Fees and Certified Copy
----------------------	---	---

<u>Mailing Address:</u> New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **\$185.00** Filing Fees, Certified Copy, and Certificate of Status

Street Address:

New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

INHS11 (7/17)

<u>Articles of Conversion</u> For <u>"Other Business Entity"</u> Into Florida Limited Liability Company	SECRETARY OF STATE TALLAHASSEE, FL	2023 HAR -1 PH 2: 18	
---	---------------------------------------	----------------------	--

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: Agri-Source Inc.

(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.)

Florida First organized, formed or incorporated under the laws of

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

July 12, 1994 on

۰.

. .

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Agri-Source, LLC

(Enter Name of Florida Limited Liability Company)

4. 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.

Signed this _26th	2023		
Signature of Authorized Representative of Limit	· ·		
Signature of Authorized Representative Printed Name Mark C. Browno			
Signature(s) on behalf of Other Business Entity: 18	See below for required signature(s)]		
Signature	Fille Diroclar		ł
Signature Printed Name <u>Rulph I. Sponcor</u> Executed by Christic Spencer, as Guar		202: T	
Signature	Tule	2023 HAR - I Secretar Tallaha	- 71
Signature	Tute	2-1	
Signature Printed Name	Tule	PH 2: See. F	
Signature		<u> </u>	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or 6 If Directors or Officers have not been selected, an Inc	Officer corporator must sign		
1f Florida General Partnership or Limited Linhilit Signature of one General Partner	ty Partnershin:		
<u>If Florida Limited Partnership or Limited Lighilit</u> Signatures of <u>ALL</u> General Partnets	ty Limited Partnership:		
All others: Signature of an authorized person			
<u>Fees</u>			
Articles of Conversion Fees for Florida Articles of Organization Certified Copy Certificate of Status	\$25 00 \$125 00 \$30 00 (Optional) \$5 00 (Optional)		

. • .

.

· , ·

.

L

Signed this <u>26th</u> day of <u>February</u>	20 <u>23</u>	
Signature of Authorized Representative of Limite	d Liability Company:	
Signature of Authorized Representative: Printed Name: Mark C. Browne	Title: Chief Executive Officer	
Signature(s) on behalf of Other Business Entity: [S	ee below for required signature(s)	
Signature: Printed Name: Mark C. Browne		
Signature: Printed Name: Ralph T. Sponeor,	Title: Director	
Executed by Christic Spencer, as Guard Signature: Printed Name:		
Signature: Printed Name:		
Signature: Printed Name:		
Signature: Printed Name:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C If Directors or Officers have not been selected, an Inc	Officer. orporator must sign.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
<u>All others:</u> 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)	

Paralles .

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is

Agri-Source, LLC

(Must contain the words "Emoted Etability Company," E.E.C., "or "EEC")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
4001 NE 35th Street	P.O. Box 879
Ocala, Florida 34479	Fruitland Park, Florida 34731-0879
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration) The name and the Florida street address of <u>Mark C. Browne</u> 1051 Boylston Street	Atered Office, & Registered Agent's Signature:
City	Zip
liability company at the place designa registered agent and agree to act in this of statutes relating to the proper and comp accept the obligations of my position Registered Agent	and to accept service of process for the above stated limited uted in this certificate. I hereby accept the appointment as capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S., s Signature (REQUIRED) NTINUED)

ARTICLE IV-

• . • . • . •

.

ı

L

i

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

'MGR" = Manager			
MGR	Browne Spencer Holdings, LLC		
	1051 BoyIston Street		• •
	Leesburg, FL 34748	S	202
			تيت
			2023 HAR - 1
		<u>2</u>	
		Э С С	
		(71"")	PH
		<u>—</u> നഗ	2:-
		rri	8
· · · · · · · · · · · · · · · · · · ·		·	
LE V: Other provisions, if any.			
LE V: Other provisions, if any.			
LE V: Other provisions, if any.			
LE V: Other provisions, if any.			
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE:	r an authorized representative of a member		
REQUIRED SIGNATURE:	r an authorized representative of a member re with section 605 0203 (1) (b), Florida Statules 1 am a unient to the Department of State constitutes a third deg	ware that	
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a doc as provided for in s 817 155, F 8 Mark C. Browne, Authorized Repre	re with section 605 0203 (1) (b), Florida Statutes 1 am a unient to the Department of State constitutes a third deg isentative	ware that	
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a doc as provided for in s 817 155, F 8 Mark C. Browne, Authorized Repre	re with section 605 0203 (1) (b), Florida Statutes 1 am a unient to the Department of State constitutes a third deg	ware that	

5 61

100 212

. .

المراجع فأنبر والمعميين