(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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Office Use Only



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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 Precision Cabinety and Design, (Enter Name of Other Business Entity)	he Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnersh	nip, common law or business trust, etc.
First organized, formed or incorporated under the laws of	C entity, the name of the country)
on //13/2006 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attac	
Precision Cabinetry and De (Enter Name of Florida Limited Liability Company)	sign, 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 mothed 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 requireme 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 hav which such members are entitled under ss. 605.1006 and 605.1061-605.1072,	ing appraisal rights the amount to F.S.  SECRETARY OF STALLAHASSEE.

Signed this	day of	March	_20 <u>_23</u>	<del>.</del>	
Signature of A	authorized Repro	esentative of Limi	ted Liability	Company:	
Signature of Au Printed Name:_	uthorized Represo Renec Ja	entative:	Title:	CEO	
		Business Entity: [			
Signature: Printed Name:_	Renei	Jordan	Title:	CEO	
Signature: Printed Name:_			Title:		
Signature: Printed Name:_			Title:		
Signature: Printed Name:_			Title:		
Signature: Printed Name:_			Title:		
Signature: Printed Name:_			Title:		
If Directors or	nairman, Vice Cha Officers have not	irman, Director, or been selected, an In- or Limited Liabili	corporator mu	_	
Signature of on	e General Partner				
Signatures of A	<u>ated Partnership</u> ALL General Partr	or Limited Liabili ers.	<u>ty Limited Pa</u>	artnersnip:	
All others: Signature of an	authorized persor	1,			
Fees:					
Fees fo Certifi	es of Conversion: or Florida Articles ed Copy: cate of Status:	s of Organization:	\$25.00 \$125.00 \$30.00 (Op \$5.00 (Opt	•	IALL/

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Precision Cabinetry And Design, LCC (Must contain the words "Limited Liability Company L.L.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:
Renec Jordan  Renec Jordan  Precision Cabinetry and Des  333 3rd Avenue North Suite 2690 Sunvise Blvd, Calite 300  St. Petersburg, FL 400st Rancho Cordova, Ca. 95742
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:
Renee Jordan Name
333 3rd Ave North Suite 400 st. Florida street address (P.O. Box NOT acceptable)
St. Petersburg FL 33701 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, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of a 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
2
Registered Agent's Signature (REQUIRED)  (CONTINUED)  Registered Agent's Signature (REQUIRED)  (CONTINUED)

Title:		Name and Address:
"AMBR" = Authoriz	ed Member	
"MGR" = Manager		Renec Jordan
MGR		333 3-d Avenue North Suite 41
	54. Petersburg	Florida 33701
	J.	•
	ons, if any.	
LE V: Other provision	ons, if any.	
LE V: Other provision	ons, if any.	
LE V: Other provision  REQUIRED SIGN  Signature of	ATURE:	uthorized representative of a member
REQUIRED SIGN  Signature of This document is exe	ATURE:  of a member or an a cuted in accordance with submitted in a document	uthorized representative of a member section 605.0203 (1) (b). Florida Statutes. I am aware that to the Department of State constitutes a third degree felony
Signature of This document is executed any false information	ons, if any.  ATURE:  of a member or an a cuted in accordance with submitted in a document 17.155, F.S.	section 605.0203 (1) (b), Florida Statutes, I am aware that to the Department of State constitutes a third degree felony
REQUIRED SIGN Signature of This document is executed any false information	ons, if any.  ATURE:  of a member or an a cuted in accordance with submitted in a document 17.155, F.S.	section 605.0203 (1) (b), Florida Statutes, I am aware that to the Department of State constitutes a third degree felony
REQUIRED SIGN  Signature of This document is executive any false information as provided for in s.8	ons, if any.  ATURE:  of a member or an a cuted in accordance with submitted in a document 17.155, F.S.  Renee E	or printed name of signee  Filing Fees
REQUIRED SIGN  Signature of This document is exe any false information as provided for in s.8  \$125.00 Filing F	ons, if any.  ATURE:  of a member or an a cuted in accordance with submitted in a document 17.155, F.S.  Renec Street of Original Control of Origi	section 605.0203 (1) (b), Florida Statutes, I am aware that to the Department of State constitutes a third degree felony or printed name of signee  Filing Fees rganization and Designation of Registered Agent
REQUIRED SIGN  Signature of This document is exe any false information as provided for in s.8  \$125.00 Filing F	ons, if any.  ATURE:  of a member or an a cuted in accordance with submitted in a document 17.155, F.S.  Renee E	or printed name of signee  Filing Fees

ARTICLE IV-