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(Re	equestor's Name)	
(Ad	idress)	
————(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
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(Do	 cument Number)	
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	,

Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Fuel Facility Manage	ement, Inc. to LLC	-
Please Debit FCA000	000003 For: 185	
Thank you Seth Neels	-\;	
1-4-/	- J	
<u> Helg</u>		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Phuto Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
,		Officer Search
1		Fictitious Search
Signature	· · · · · · · · · · · · · · · · · · ·	Fictitious Owner Search
Signature		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
N	D-1	UCC 11 Search
Name	Date Time	UCC 11 Retrieval
Walk-In Thomasule SA ACC	Will Pick Up	Courier

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Fuel Facility Management, LLC	c	
SUDJECT.	Resulting Florida Li	imited Company)
		eation, and fees are submitted to convert an "Other any" in accordance with s. 605.1045, F.S.
Please return all correspondence concern	ing this matter to	o:
•		
Janet Hoose		
(Contact Person)		_
Fuel Facility Management, LLC		
(Firm/Company)		
26143 SW Viterbo Way		
(Address)		
Port St. Lucie, FL 34986		
(City, State and Zip Code)	
janethoose@ffmairport.com		
E-mail Address: (to be used for future annual	report notifications	<u> </u>
For further information concerning this n	natter, please cal	d:
D Randali Briley	at (⁹⁰⁴	285-5299
(Name of Contact Person)		de) (Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the		s processed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	and Certified C	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address; New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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: Fuel Facility Management, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
06/04/2004 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:
Fuel Facility Management, 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 14 day of Quyust	_ 20_ 23
Signature of Authorized Representative of Acim	ited Liability Company:
Signature of Authorized Representative:	Parada dela
Printed Name: Janet Hoose	Title: Manager
Printed Name: Janet Ploose 177	Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: August Vens Printed Name: Jarle Hoose	
Printed Name: Jarfel Hoose	Title: President
Signature:	1
Printed Name:	Inte:
Signature	•
Signature:	Title:
Signature:	· · · · · · · · · · · · · · · · · · ·
Signature:Printed Name:	Title:
Signature:Printed Name:	Tisl
Printed Name:	TRIC:
Signature:	
Signature:Printed Name:	STitle: 37
If Florida Corporation:	•
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	te Partnarchin
Signature of one General Partner.	ity farthership.
<u>lf Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	_
Fees:	·
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Fuel Facility Mana	agement, LLC		
(Must contain the words "Limited Lie	ibility Company, "L.U.C.," or "f.I.C.")	_
ARTICLE II	Address:		
		e principal office of the Limited Liability (Company is:
Principal Office	e Address:	Mailing Address:	
26143 SW Viterbo	o Way	26143 SW Viterbo Way	
Port St. Lucie, FL		Port St. Lucie, FL 34986	-
(The Limited Liability	Registered Agent, Registe Company cannot serve as its own H an active Florida registration.)	ered Office, & Registered Agent's Signat legistered Agent. You must designate an individual or an	t ure: other
(The Limited Liability business entity with	Company cannot serve as its own b	tegistered Agent. You must designate an individual or an	ture: other
(The Limited Liability business entity with	Company cannot serve as its own ban active Florida registration.)	tegistered Agent. You must designate an individual or an	ture: other
(The Limited Liability business entity with	Company cannot serve as its own han active Florida registration.) The Florida street address of the Janet Hoose	tegistered Agent. You must designate an individual or an	ture: other
(The Limited Liability business entity with	Company cannot serve as its own han active Florida registration.) The Florida street address of the Janet Hoose	tegistered Agent. You must designate an individual or an he registered agent are:	ture: other
(The Limited Liability business entity with	Company cannot serve as its own Fan active Florida registration.) The Florida street address of the Janet Hoose 26143 SW Viterbo Way	tegistered Agent. You must designate an individual or an he registered agent are:	ture: other
(The Limited Liability business entity with	Company cannot serve as its own Fan active Florida registration.) The Florida street address of the Janet Hoose 26143 SW Viterbo Way	he registered agent are:	ture: other
(The Limited Liability business entity with	Company cannot serve as its own Fan active Florida registration.) The Florida street address of the Florida street address of the Janet Hoose 26143 SW Viterbo Way Florida street address (he registered agent are: ame P.O. Box <u>NOT</u> acceptable)	ture: other

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Janet Hoose
WGR	26143 SW Viterbo Way
	Port St. Lucie, FL 34986
MGR	John Jeremiah
WGN	547 Canal Road
	Ponte Vedra Beach, FL 32082
	-

(Use attachment if necessary)	
CLE V: Other provisions, if any.	
NEALINGS OF SEATING	
<u>REQUIRED</u> .SIGNATURE:	

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.

Janet Hoose

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)