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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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.\? • CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 120000000195 REFERENCE : AUTHORIZATION : COST LIMIT : \$ 150.00				
RDER DATE :				
RDER TIME : 9:53 AM				
RDER NO. : -005				
USTOMER NO:				
DOMESTIC AMENDMENT FILING NAME: CAUSSEAUX, HEWETT, & WALPOLE, INC.				
EFFECTIVE DATE:				
XX ARTICLES OF CONVERSION AND ORGANIZATION RESTATED ARTICLES OF INCORPORATION				
LEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				
ONTACT PERSON: Alexxis Weiland-sorenson EXT#				

EXAMINER'S INITIALS:

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.

	e name of the "Other Business Entity" immediately prior to the filing of the Articles of is: Causseaux, Hewett, & Walpole, Inc.
2. The	"Other Business Entity" is a <u>Florida corporation</u>
Eirst.organ	izedformed or incorporated under the laws of Florida on April 13, 1988.
3. The of Organiz	e name of the Florida Limited Liability Company as set forth in the attached Articles zation:
Causseaux	Hewett, & Walpole, LLC
(The effect calendar d Note: If the d	ot effective on the date of filing, enter the effective date: tive date: Cannot be prior to date of receipt or filed date nor more than 90 lays after the date this document is filed by the Florida Department of State.) late inserted in this block does not meet the applicable statutory filing requirements, this will not be 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.

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 day ofJanuary	20 <u>24.</u>			
Signature of Authorized Representative of Limit	ed Liability Company:			
Signature of Authorized Representative: Printed Name: Robert J Walpole				
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]				
Signature: Printed Name: Robots. Walpole	Title: Chief Executive Officer, President and Secretary			
Signature:Printed Name:	Title:			
Signature:	-Title:			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature:	Title			
Printed Name: Title:				
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ity Partnership:			
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ity Limited Partnership:			
All others: 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)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
<u>Causseaux, Hewett, & Walpole, LLC</u>	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC	2.")
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limi	ted Liability Company

Principal Office Address:

Mailing Address:

11801 Research Dr., Alachua, FL 32615_____ 11801 Research Dr., Alachua, FL 32615

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:

Corporation Service	ce Company		
	Name		
1201 Hays Street Florida street address (P.O. Box NOT acceptable)			
Tallahassee	FL	32301-2525	
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 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)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMER" = Authorized Member			
"MGR" = Manager			
-			
MGR	Robert J. Walpole		
	11801 Research Dr.		
	Alachua, FL 32615		
	•		
(Use attachment if necessary)			
ARTICLE V: Other provisions, if any.			
ARTICLE V. Other provisions, it any.	_		
- · · · · · · · · · · · · · · · · · · ·			
REQUIRED SIGNATURE:	////		
ALQUIRLD SIGNATURE.			
	_ /		

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (I) (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.

Robert Walpole

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)