# C240W47039

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT, MAIL
. (Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
Office Use Only



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03/20/24--01014--002 2024 HAR 28 PA 4: 55

ALLAHASSEE, FLORID

RECEIVED



## **COVER LETTER**

Division of C							
SUBJECT: WinDoor	r, LLC						
30b/2e1	(Name of Re	sulting Florida Limi	ted Co	mpany)			
				nd fees are submitted to co accordance with s. 605.104			'r
Please return all corr	espondence concernin	g this matter to:					
Greg Payton							
	(Contact Person)		-				
Stinson LLP							
	(Firm Company)	-	-				
100 South Ashley Driv	e. Suite 500						
	(Address)		-				
Tampa, Florida 33602							
((	City, State and Zip Code)		=				
bl@miwd.com							
E-mail Address; (to b	e used for future annual re	port notifications)	_				
For further informati	on concerning this ma	tter, please call:			<del></del> .	2024 HAR 28	
Greg Payton		_at ( <u></u> 813	534-	-7552		25 25 25	
(Name of Conta	ict Person)	(Area Code	) (Da	ytime Telephone Number)		28	£
Enclosed is a check t dollars and drawn on	or the following amou a bank located in the	int: (All checks p United States)	oroces	sed by this office must be	payabl		
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□S155.00 Filing Fees and Certificate of Status	□S180.00 Filing and Certified Co		■ \$185,00 Filing Fees, Certified Copy, and Certificate of Status	F-1	<u>ග</u> ග්	
Mailing Add	ress:		Stree	et Address:			
New Filing S				Filing Section			
Division of C P.O. Box 632				sion of Corporations Centre of Tallahassee			
Tallahassee, F				N. Monroe Street, Suite 8	10		
			Talla	hassee, FL 32303			

## **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.

WinDoor Incorporated	s or Con	version	n is.
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a		· <del></del>	<del></del> .
(Enter entity type. Example: corporation, limited partnership, general partnership, commor	law or bu	siness t	rust, etc.
First organized, formed or incorporated under the laws of			<b>-</b>
(Enter state, or if a non-U.S. entity, the	iame of the	e countr	cy)
January 11, 2001 on			
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Artic WinDoor, LLC	les of Oi	rganiz	ation:
(Enter Name of Florida Limited Liability Company)		2	
4. If not effective on the date of filing, enter the effective date:	; ; ; ;	024 H	us jeg
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90	) cälenda	ır <u>l</u> dayı	s 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 document's effective date on the Department of State's records.	will not be	2號d : PH	मुँ धार्नु
5. The plan of conversion has been approved in accordance with all applicable statutes.		4: 55	( and
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members having appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.</li> </ol>	ıl rights t	he amo	ount to

Signed this 28th day of March	20 <sup>24</sup>			
Signature of Authorized Representative of Limit	ted Liability Company:			
Signature of Authorized Representative: Authorized Printed Name: Matthew G. DeSoto		_		
Signature(s) on behalf of Other Business Entity:				
Signature: Aut assor Printed Name: Matthew G. DeSoto	Title: Director	- -		
Signature:Printed Name:	_ Title:	<del>-</del>		
Signature:Printed Name:	_ Title:	-		
Signature:Printed Name:	_ Title:	- -		
Signature:Printed Name:	_ Title:	- -		
Signature:Printed Name:	_ Title:	- -		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Off Directors or Officers have not been selected, an Inc				
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:		2	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:		024 KAR	12 1 1 22
All others: Signature of an authorized person.			20 PH	f) f
Fees:			l 4: 55	ددار دورا
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		٠,	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

WinDoor, LLC		
	Must contain the words "Limited Lia	oility Company, "L.L.C.," or "LLC.")
ARTICLE II -		
The mailing add	ress and street address of the	principal office of the Limited Liability Compa
Principal Offic	e Address:	Mailing Address:
2550 Interstate D	rive, Suite 400	2550 Interstate Drive, Suite 400
Harrisburg, PA 1		Harrisburg, PA 17110
The Limited Liability business entity with	y Company cannot serve as its own Ro an active Florida registration.) ac Florida street address of th	
The Limited Liability business entity with	y Company cannot serve as its own Roan active Florida registration.)  The Florida street address of the COV Pov National South Pine Island Roan active Florida street address of the COV Pov National South Pine Island Roan active Florida registration.)	e registered Agent. You must designate an individual or another e registered agent are:  OHON SyStem me
The Limited Liability business entity with	company cannot serve as its own Roan active Florida registration.)  The Florida street address of the COV POV No. 1200 South Pine Island Roan Florida street address (Florida	e registered agent are:  OHON SUSTEM  me  ad  O Box NOT acceptable)
(The Limited Liability business entity with	company cannot serve as its own Roan active Florida registration.)  The Florida street address of the COV Pov Na  1200 South Pine Island Roan Florida street address (Florida street address)	e registered agent are:  OHON SUSTEM  me  ad  O. Box NOT acceptable)
(The Limited Liability business entity with	company cannot serve as its own Roan active Florida registration.)  The Florida street address of the COV POV No. 1200 South Pine Island Roan Florida street address (Florida	e registered Agent. You must designate an individual or another e registered agent are:  OHON SyStem me

(CONTINUED)

#### ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Matthew G. DeSoto  2550 Interstate Pr. Suite 40  Harrisburg, PR 17110
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
	-:,,
REQUIRED SIGNATURE:	Great by  O/Sette 224E72C4Z
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree fellows.
Matthew G. DeSoto	
Ту	ped 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)