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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 04/12/2024		~ WALI	(IN⇔
ENTITY NAME_WILL	IAMS HOLDINGS FLORIDA LLC		
DOCUMENT NUMBER			
	PLEASE FILE THE ATTACHED AND RETURN		
xxxxxxxx	Plain Copy Certified Copy		
	Certificate of Status		
,	**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY*		·
	Certified Copy of Arts & Amendments Certificate of Good Standing	2024 APR 12 A STANSTANCE TALLAHASSI	-
	APOSTILLE' / NOTARIAL CERTIFICATION	AM 9: 35 USTATE SEE, FL	
COUNTRY OF DESTINA NUMBER OF CERTIFIC			
TOTAL OWED \$150	ACCOUNT #: 1201600		
Please call Tina at	the above number for any issues or concerns. Thank y		

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: WILLIAMS HOLDING CORPO	DRATION
	sulting Florida Limited Company)
	eles of Organization, and fees are submitted to convert an "Other iability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concernin	g this matter to:
DAVID S. DELRAHIM	
(Contact Person)	
SHUMAKER, LOOP & KENDRICK, LLP	
(Firm/Company)	
101 E KENNEDY BLVD SUITE 2800	
(Address)	
TAMPA, FL 33602	
(City, State and Zip Code)	
DTURNER@SHUMAKER.COM	
E-mail Address: (to be used for future annual re	port notifications)
For further information concerning this ma	tter, please call:
DAVID S. DELRAHIM	at (727) 288-9501
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	int: (All checks processed by this office must be payable in US
dollars and drawn on a bank located in the	United States)
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	United States) S180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status Certificate of Status
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 <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.

(i:n	ter Name of Other Business Entity)
2. The "Other Business Entity" is	Corporation
(Enter entity type. Exampl	e: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorpor	rated under the laws of
10/21/1998	(conter state, or in color control yand or and an analy)
On(date of organization, formation or in-	corporation)
3. The name of the Florida Limited	d Liability Company as set forth in the attached Articles of Organization:
WILLIAMS HOLDINGS FLORIDA LI	LC
(Enter Name	of Florida Limited Liability Company)
	or Fronta Eminet Elability Company)
4. If not effective on the date of fil (The effective date: Cannot be pr the date this document is filed by	ing, enter the effective date: ior to date of receipt or filed date nor more than 90 calendar days after the Florida Department of State.) es not meet the applicable statutory filing requirements, this date will not be listed as the
4. If not effective on the date of fil (The effective date: Cannot be pre the date this document is filed by Note: If the date inserted in this block do document's effective date on the Department.	ing, enter the effective date: ior to date of receipt or filed date nor more than 90 calendar days after the Florida Department of State.) es not meet the applicable statutory filing requirements, this date will not be listed as the

Signed th	is <u>11th</u>	day of April	20 24	<u>.</u>		
Signatur	e of Authori	ized Representative of L	imited Lia	bility Company:		
Signature Printed Na	of Authoriz ame: ROY F	ed Representative:	Title:	MANAGER		
Signature	e(s) on behal	f of Other Business Entit	<u>v:</u> [See belo	ow for required signatu	re(s)	
Signature: Printed Na	ame: ROY F	. WILLIAMS	Title:	PRESIDENT/DIRECTO	R	
Signature: Printed Na	 ame:		Title:			
		-				
Signature:						
Printed Na	ame:		Title:			
Signature If Director	rs or Officers	Vice Chairman, Director, have not been selected, an	Incorporate	· ·		
	General Pa of one Gener	<u>rtnership or Limited Lia</u> al Partner.	<u>bility Partn</u>	ership:		
•		rtnership or Limited Lial neral Partners.	bility Limit	ed Partnership:	& . ?	
All others Signature	<u>:</u> of an authori	zed person.			ZIPU AFR	6
Fees:					12 13/53	
Fe Co	ticles of Cores for Florid ertified Copyertificate of S	a Articles of Organization	\$30.00		#M 1 34 OF STATE OF STATE	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	ıme:		
The name of the I	Limited Liability Compar	ny is:	
	WILLIAMS HOL	DINGS FLORIDA LLC	
()	lust contain the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A The mailing addre		the principal office of the Limited	d Liability Company is:
Principal Office	Address:	Mailing Address:	
4406 Madison Indu Tampa, FL 33619	ıstrial Lane, Bldg A	4406 Madison Industrial La Tampa, FL 33619	ine, Bldg A
(The Limited Liability 0		stered Office, & Registered Age Registered Agent. You must designate an i	
The name and the	Florida street address of	the registered agent are:	
	DAVID S. DELRAHIM		
	C/O SHUMAKER, LOOP &	Name KENDRICK, LLP	
	101 E KENNEDY BLVD	SUITE 2800	
	Florida street address	(P.O. Box NOT acceptable)	
	Tampa ————————	FL ³³⁶⁰²	
	City	Zip	
liability com registered agent statutes relatir	pany at the place designa t and agree to act in this c ig to the proper and comp	and to accept service of process fo ted in this certificate, I hereby acc capacity. I further agree to compl plete performance of my duties, an as registered agent as provided fo	cept the appointment as ly with the provisions of all nd I am familiar with and

4	D	TI		T.	IV-
/ .	к		ι.	ı,r.	I V -

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	Roy F. Williams 4406 Madison Industrial Lane, Bldg A			
WGA				
	Tampa, FL 33619			
	Tampa, FL 33019			
	···			
(Use attachment if necessary)				
(Ose underlinent if necessary)				
CLE V: Other provisions, if any.				
F 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
REQUIRED SIGNATURE				

Signature of a member or an authorized representative of a member $c_1 = c_2$

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.

ROY F. WILLIAMS

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)