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| PICK-UP WAIT | MAIL |
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| 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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2024 HAY 16 AM 9: 47 SECHLIANASSEE, PLE





Filing Cover Sheet

To: Florida Division of Corporations

From: LESLIE SELLERS C/O Capitol Services, Inc.

Date: 5/16/2024

Trans#: 1461559

Entity Name: JOE COOL AIR CONDITIONING & HEATING OF THE SUNCOAST, LLC

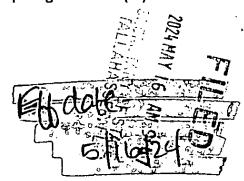
| Articles of Organization () | Amendment () |
|------------------------------|-------------------------------|
| Articles of Dissolution () | Annual Report () |
| Conversion (XXX) | Fictitious Name () |
| Foreign Qualification () | Limited Liability () |
| Limited Partnership () | Merger () |
| Reinstatement () | Withdrawal / Cancellation () |
| Other () | Partnership Registration () |

STATE FEES PREPAID WITH CHECK # 3912 FOR \$180.00

PLEASE RETURN:

Certified Copy (XXX) Plain Stamped Copy ()

Good Standing () Certificate of Fact ()



Phone: 855-498-5500



Fo: Florida Division of Corporations

From: LESLIE SELLERS C/O Capitol Services, Inc.

Filing Cover Sheet

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| Other () | Partnership Registration () | |
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| PLEASE RETURN: | oi 🔰 | |
| Certified Copy (XXX) Plain Stamped Copy | () | |
| Good Standing () Certificate of Fact () | | |
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Phone: 855-498-5500

Articles of Conversion For "Other Business Entity"

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: JOE COOL AIR CONDITIONING & HEATING OF THE SUNCOAST, 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 FLORIDA (Enter state, or if a non-U.S. entity, the name of the country) |
| on SEPTEMBER 19, 2011 (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| JOE COOL AIR CONDITIONING & HEATING OF THE SUNCOAST, LLC |
| (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: MAY 16, 2024 (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. |
| 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 anount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. |
| |

| Signed this 16 th day of MAY | _20 <u>_24</u> |
|---|--|
| Signature of Authorized Representative of Limit | ed Liability Company: |
| Signature of Authorized Representative: Printed Name: ElLEEN M. GRAHAM | _ Title:MANAGER |
| Signature(s) on behalf of Other Business Entity: [5 | |
| Signature: Printed Name: EILEEN M. GRAHAM | Title: PRESIDENT |
| | |
| Signature:Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | _ Title: |
| Signature:Printed Name: | m'.1 |
| Printed Name: | _ little: |
| Signature:Printed Name: | Title: |
| | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C | Officer. |
| If Directors or Officers have not been selected, an Inc | orporator must sign. |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner. | y Partnership: |
| If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners. | y Limited Partnership; |
| All others: Signature of an authorized person. | |
| <u>Fees:</u> | |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) |

2024 MAY 16 AM 9: 47

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JOE COOL AIR CONDITIONING & HEATING OF THE SUNCOAST, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

| rimcipai Ottic | e Address: | Mailing | Address: | |
|--|---|--------------------|--|--------------|
| 7308 56TH STREE | ET N | 7308 56TH | STREET N | |
| PINELLAS PARK, | FL 33781 | PINELLAS | PARK, FL 33781 | • |
| The Limited Liabili business entity with | - Registered Agent, Register ty Company cannot serve as its own Re a an active Florida registration.) he Florida street address of the | gistered Agent. Y | ou must designate an individual or and | ure: ther |
| | BUSH ROSS REGIST | ERED AGE | NT SERVICES, LLC | |
| | Na | ime | | |
| | | | | |
| | 1801 N. HIGHLAND A | VE. | | |
| | 1801 N. HIGHLAND A Florida street address (F | | acceptable) | |
| | | P.O. Box NO | | . 2 |

Registered Agent's Signature (REQUIRED)

BY: ADAM L. ALPERT, ESQ., VP OF REGISTERED AGENT

(CONTINUED)

| "MGR" = Manager | |
|--|--|
| Work - Manager | |
| | |
| | |
| MANAGER | EILEEN M. GRAHAM |
| | 7308 56TH STREET N. |
| | PINELLAS PARK, FL 33781 |
| MANAGER | THOMAS M. GRAHAM |
| - In the total to | 7308 56TH STREET N. |
| | PINELLAS PARK, FL 33781 |
| | |
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| (Use attachment if necessary) | |
| (Use attachment if necessary) | |
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| (Use attachment if necessary) LE V: Other provisions, if any. | **effective date 5/16/2024 |
| · · · · · · · · · · · · · · · · · · · | **effecitve date 5/16/2024 |
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| LE V: Other provisions, if any. | ALLAHAS |
| LE V: Other provisions, if any. REQUIRED SIGNATURE: | ALLAHASSE |
| REQUIRED SIGNATURE: | ALLAHASSEE, |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance | an authorized representative of a member |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the degree felony is the degree felony is the degree felony. |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document is provided for in s.817.155, F.S. EILEEN M. GRAHAM, MANA | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the degree felony is the degree felony is the degree felony. |

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

ARTICLE IV-

Company: