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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only

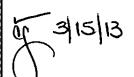
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SECRETARY OF STATE DIVISION OF CORPORATION:



COVER LETTER

Charter Section
Division of Corporations

TO:

SUBJECT: Allstate Transmission of Homosassa. Name of Resulting Florida Profit Corporation	<u>ll</u> c				
The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.					
Please return all correspondence concerning this matter to:					
Michelle K Dyer Contact Person					
Austate Transmission of Homosassa Firm/Company	0IV				
1717 South Suncoast Blud Address	DIVISION OF				
Homosassa, Florida 34448 City, State and Zip Code	CORPORATIONS AM 9: 07				
AUSTATE TRANSMISSION HOMOSOSSA Q MOUL Com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Michelle K Dyer at (352) 795-2244 Name of Contact Person Area Code and Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$105.00 Filing Fees and Certificate of Status \$\int \frac{1}{3}\frac{113.75}{113.75} \text{ Filing Fees} and Certified Copy and Certificate of Status) 5,				
STREET ADDRESS: Charter Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Charter Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314					



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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 22, 2013

MICHELLE K DYER 1717 SOUTH SUNCOAST BLVD. HOMOSASSA, FL 34448

SUBJECT: ALLSTATE TRANSMISSION OF HOMOSASSA LLC

Ref. Number: W13000010939

We have received your document for ALLSTATE TRANSMISSION OF HOMOSASSA LLC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 813A00004389

DIVISION OF CORPORATIONS

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Certificate of Conversion For FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

"Other Business Entity"

13 MAR 11 AM 9: 07

Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
ALLState Transmission of Homosassa UC Enter Name of Other Business Entity W300002168
Enter Name of Other Business Entity L30000 2143°
2. The "Other Business Entity" is a <u>Limited LabiLity</u> Company (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of <u>FLOVIDA</u> (Enter state, or if a non-U.S. entity, the name of the country)
on 2-11-2013
on 2-11-2013 Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
FLorida, U.S.
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
ALLState Transmission of Homosassa, Inc. Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date. 3 - 1 - 2013 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed	I this I day of March	, 20 <u>13</u> .	
Requi	red Signature for Florida Profit Corporat	tion:	
been s	ure of Chairman, Vice Chairman, Director, Celected, an Incorporator: Number 1 Name: Michelle K. Dyler Title:	(Chizer	
	red Signature(s) on behalf of Other Busines are(s).]	s Entity: [See below for required	
Signati Printed	re: Muhelle K Dyer Name: Michelle K Dyer	_ Title: Authorized Re	<u>Pr</u> esentative
Signati	are:		
Printed	ure:	Title:	
	ure: I Name:		
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	res of <u>ALL</u> General Partners.	ty Limited I at the touch.	
	ida Limited Liability Company: are of a Member or Authorized Representative	ı.	SEC DIVISION
All oth Signati	ers: ure of an authorized person.		CRETARY SION OF CO
Fees:			₹ 200 €
	Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	STATE ORATIONS 9: 07

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: AUState TRANSMISSION OF Homosassi
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:
Principal street address 1717 South Suncoast Blud. Homosassa, Florida Mailing address, if different is:
34448
ARTICLE III PURPOSE The purpose for which the corporation is organized is:
Transmission repair, evaluations, replace,
and maintenance.
The number of shares of stock is: (100) One Hundred
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
Name and Title: Michelle Klyer Chairman Name and Title:
Address: 1717 South Suncoast Address:
Homosassa, FL. 34448
Name and Title: Charles J. Higdon Name and Title:
Address: 1717 South Suncoast Bludddress:
11-0m05assa, FL 34448
Name and Title: Robert T Higdon Name and Title:
Address: 1717 South Suncoast Rightdress:
Homosassa FL. 34448
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: Michelle k Oyer = 337
Address: 1717 South Suncoast Blud
Homosassa FL 34448
TIE

ARTICLE VII INCORPORATOR The name and address of the Incorporator is:			
Name: Michelle K Dyer			
Address: 1717 South Suncoast Blud			
Homosassa, Florida, 34	448		
·			
Having been named as registered agent to accept service of process designated in this certificate, I am familiar with and accept the appoint capacity			
Muhelle K. Registered Agent	2.19.2013 Date		
I submit this document and affirm that the facts stated herein are true. 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.			
muhele KDiser	2.19.2013		
Required Signature/Incorporator	Date		

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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