(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		



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Office Use Only

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COVER LETTER

TO: Charter Section Division of Control Contro					
	. <u>-</u>				
SUBJECT: PILLAR LLC Name of Resulting Florida Profit Corporation					
	Name of Resum	ig Florida From Corporado	, ,		
			, and fees are submitted to tion" in accordance with s.		
Please return all corr	respondence concernin	g this matter to:			
Kristopher	M. Nowicki				
	Contact Person				
Nooney an	d Roberts				
	Firm/Company				
1680 Emer	son St				
	Address				
Jacksonvill	e, FL 32257				
(City, State and Zip Code				
knowicki@n	ooneyandrobe	erts.com			
E-mail address: (to	be used for future annual r	eport notification)			
For further informat	ion concerning this ma	tter, please call:			
		_at ()			
Name of Co	ntact Person	Area Code and Dayti	me Telephone Number		
Enclosed is a check	for the following amou	nt:			
■ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing Fees and Certified Copy	☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRES	<u>ss:</u>	MAILING A	ADDRESS:		

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

July 9, 2014

KRISTOPHER M. NOWICKI NOONEY AND ROBERTS 1680 EMERSON ST. JACKSONVILLE, FL 32257

SUBJECT: PILLAR, INC. Ref. Number: W14000042177

We have received your document for PILLAR, INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

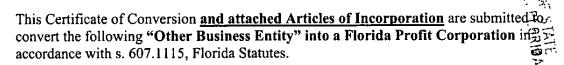
Letter Number: 014A00014750

Maryanne Dickey Regulatory Specialist II New Filing Section

www.sunbiz.org

Certificate of Conversion For "Other Business Entity" Into

Florida Profit Corporation



1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

PILLAR, LLC

L0500037960

Enter Name of Other Business Entity

2. The "Other Business Entity" is a Limited Liability 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 Florida

(Enter state, or if a non-U.S. entity, the name of the country)

on 04/18/2005

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:
- 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>

PILLAR, INC.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: ______.

(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; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

	et	1 /				
Signe	d thisday of	Auly		, 20/	<u>'4</u> .	
	ired Signature for Florid	•	tions			
Requ	ireu Signature for Floric	ia From Corpora	110111:			
Signa	ture of Chairman, Vice Cl	nairman, Director,	Officer, or, i	f Directors of	or Officers have	not
been s	selected, an Incorporator:	1120				
Printe	selected, an Incorporator: d Name: <u>///w/ae/ 5</u>	Hy H Title:	P-5			
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Signat	ures of ALL General Partn	ers.	-	-		
If Flor	rida Limited Liability Con	mpany:				
Signat	ure of a Member or Author	ized Representative	Э.			
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All ot	ners: ure of an authorized persor					
DIBIIAL	are or an aumorized persor	l .				
Fees:						
<u>= CC3.</u>	Certificate of Conversion	n·	\$35.00			
	Fees for Florida Articles		\$70.00			
	Certified Copy:	or incorporation:	\$70.00 \$8.75 (Op	tional)		
	Certificate of Status:		` •	,		
	Continuate of Status.		\$8.75 (Op	uonai)		

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

The name	of the corporation shall be: PILLAR, I	NC.
ARTICL.	E II PRINCIPAL OFFICE	ALL A
The princi	pal place of business/mailing address is:	発
	Principal street address	Mailing address, if different is:
2232	Corporate Square BLVD	To a
	sonville, FL 32216	OR THE
ARTICL. The purpo	E III PURPOSE ose for which the corporation is organized is:	**************************************
The number	E IV SHARES er of shares of stock is:	
ARTICLI	,	IDECTORS
	Title: Michael S. Griffith P/S	
	13055 Islesworth Ridge Ct.	Name and Title:
Address:	Jacksonville, FL 32225	Address:
Name and	Title:	Name and Title:
Address:		Address:
Name and	Title:	Nome and Title
	Title.	Name and Title:
Address:		Address:
ARTICLI The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT ac	ecceptable) of the registered agent is:
Name:	Kristopher M. Nowicki	
Address:	1680 Emerson St.	
- 1001 0001	Jacksonville, FL 32207	

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

Name: Michael Shawn Griffth

13055 Isleworth Ridge Ct.

Jacksonville FL, 32225

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, Lam familiar with and accept the appointment as registered agent and agree to act in this capacity

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.

1 July 204 Date

Required Signature/Registered Agent

Required Signature/Incorporator