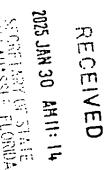
(15000)36197

(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



000440536040





COVER LETTER

Division of Corporations	
^ 10	anch LLC
	liting Florida Limited Company)
	es of Organization, and fees are submitted to convert an "Other ability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	this matter to:
SPAN Brand (Contact Person)	Ch less care
ODEMAIN St Gra (Address)	ind Ridge
(City. State and Zip Code) Taylor Q3 Q Q E-mail Address: (to be used for future annual rep	hoo, Com
For further information concerning this matt	ter, please call:
(Name of Contact Person)	at () (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amour dollars and drawn on a bank located in the U	nt: (All checks processed by this office must be payable in US United States)
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy □\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address:	Street Address:
New Filing Section	New Filing Section Division of Corporations
Division of Corporations P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Co Sean Branch Floor Covering In C.	nversion is:	
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a	20	etc.)
First organized, formed or incorporated under the laws of Florida		
(Enter state, or if a non-U.S. entity, the name of the		1
on 1-29-04	- :	. 3
(date of organization, formation or incorporation)	<u>. च</u>	المسدد
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of 6	Organization	n:
Stan Branch Floor Covering LLC		
(Enter Name of Florida Limited Liability Company)		
4. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calend	dar dave aft	.a.p
the date this document is filed by the Florida Department of State.)	iai uays ain	CI
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the	;
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 amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

. ,		
Signed this 30 day of Tena	2025	
Signature of Authorized Representative of Li	mited Liability Company:	
Signature of Authorized Representative:	v Don	
Printed Name: Sega Branch	rile: / \auq \ \to	
Signature(s) on behalf of Other Business Entity		
Signature: Son Branch Printed Name: Span Branch	Title: MAG NUYCV	
Signature:Printed Name:	Title:	
		.?
Signature:Printed Name:		025
Printed Name:	Title:	
Signature:		. 2
Printed Name:	Title:	٠, .
0.		<u> </u>
Signature:Printed Name:	Title:	?
		نٹ ، ،
Signature:Printed Name:		
Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, If Directors or Officers have not been selected, an		
If Florida General Partnership or Limited Liab Signature of one General Partner.	oility Partnership:	
If Florida Limited Partnership or Limited Liab Signatures of ALL, General Partners.	oility Limited Partnership:	
All others: Signature of an authorized person.		

Articles of Conversion: S25.00
Fees for Florida Articles of Organization: S125.00

Fees:

Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Sean Branch Flo (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2026 Main St Grand Ridge E132442	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature:
The name and the Florida street address of the results of the resu	
2026 Mg Florida street address (P.O.	Box NOT acceptable)
Grand Ridge	F132442 Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and tistered agent as provided for in Chapter 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	Stan Branch 2026 Main St Grand Ridge F132	
		
(Use attachment if necessary)		
CLE V: Other provisions, if any.		
DEGLIDED CICNATUDE.		
REQUIRED SIGNATURE:		
This document is executed in accordance any false information submitted in a docu	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes, I am aware that iment to the Department of State constitutes a third degree felor	
Sean Br	Yped or printed name of signee	
	Filing Fees of Organization and Designation of Registered A	

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-

Company: