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(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
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COVER LETTER

TO: Registration S Division of C		•	
SUBJECT: Three Do	gs Farm Inc Conversion to	Florida Limited Liability	Company
bobole i.		of Resulting Florida Limite	
			nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
Cristi Nemeth			
· · · · · · · · · · · · · · · · · · ·	(Contact Person)	· · · ·	
Three Dogs Farm Inc			
	(Firm/Company)		
2837 Bancroft Blvd			
	(Address)		
Orlando, FL 32833			
(1	City, State and Zip Code)		
threedogsfarm@gmail.co	•		
E-mail Address: (to b	e used for future annual re	port notifications)	
	on concerning this ma		*
Cristi Nemeth		_at (407)443-:	3039
(Name of Conta	ict Person)	(Area Code) (Day	ytime Telephone Number)
Enclosed is a check f	for the following amou	int:	
☐ \$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
STREET ADDRES	S:	MAILING A	ADDRESS:
Registration Section		Registration	Section
Division of Corporat	ions	Division of C	•
Clifton Building		P. O. Box 63	27

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

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 Busine Three Dogs Farm Inc	ss Entity" immediately prior to the filing of the Articles of Conversion is:
	nter 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 incorpo	rated under the laws of Florida
on January 13, 2015 (date of organization, formation or in	(Enter state or if a non LLS entity the name of the country)
(date of organization, formation or in	corporation)
3. The name of the Florida Limite	d Liability Company as set forth in the attached Articles of Organization:
Three Dogs Farm, LLC	,
(Enter Name	e of Florida Limited Liability Company)
4. If not effective on the date of fi	ling, enter the effective date:
date this document is filed by the date listed in the attached Artick	e prior to date of receipt or filed date nor more than 90 days after the e Florida Department of State; <u>AND</u> 2) must be the same as the effective es of Organization, if an effective date is listed therein.) be not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Departn	

Page 1 of 2

Signed this 22nd day of November	_ 20_15
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative:	Title: AMBR
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)
Signature: Culti & Nemoth	
Printed Name: Cristi S Nemeth	Title: President
Signature:	
Printed Name: John Nemeth	Title: Vice President
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Directors of Officers have not been selected, an inc	corporator 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.	•
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Li		mpany is:	:				15 N
Three Dogs Farm, LLC						<u></u>	05 AON 30
(Mu	st end with the words "L	imited Liabi	lity Company, "L	.L.С.,'' от "LLС.'	")		Ē.
ARTICLE II - Ad	dress:						<u> </u>
The mailing addres	s and street addres	s of the p	rincipal offic	e of the Limi	ted Liabilit	y Compa	any is:
Principal Office A	ddress:		Mailing A	ddress:			ಬ
2837 Bancroft Blvd			2837 Bancro	oft Blvd			
Orlando, FL 32833			Orlando, FL	. 32833			
ARTICLE III - Re (The Limited Liability Co- business entity with an a	mpany cannot serve as i	ts own Regis					
The name and the F	lorida street addre	ss of the	registered age	ent are:			
•	PATRICE	A A.	HENSON				
		Nam	e				
	1166 CA	RMEL	CIRCLE	# 220			
	Florida street add	dress (P.C). Box <u>NOT</u> a	acceptable)			
	CASSILBERL		FL	32707-	6455		
	Cit	y		Zip			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

atricia a Henson

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Cuinti C Namath
AMBR	Cristi S Nemeth
	2837 Bancroft Blvd
	Orlando, FL 32833
AMPR	John Nemeth
AMBR	2837 Bancroft Blvd
	Orlando, FL 32833
	menta menta
 	
	
LE V: Effective date, if other than the	ne date of filing: (OPTIONA
effective date is listed, the date must 0 days after the date of filing.) The date inserted in this block does not meet	t be specific and cannot be more than five business of the applicable statutory filing requirements, this date will not be
CLE V: Effective date, if other than the effective date is listed, the date must days after the date of filing.) the date inserted in this block does not meet the effective date on the Department of States	t be specific and cannot be more than five business of the applicable statutory filing requirements, this date will not be
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CLE V: Effective date, if other than the effective date is listed, the date must 0 days after the date of filing.) If the date inserted in this block does not meet not's effective date on the Department of State CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of the document is executed in a lam aware that any false information.	t be specific and cannot be more than five business of the applicable statutory filing requirements, this date will not be e's records. Solution of the applicable statutory filing requirements, this date will not be e's records. Solution of the applicable statutory filing requirements, this date will not be e's records. Solution of the applicable statutory filing requirements, this date will not be e's records.
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CLE V: Effective date, if other than the effective date is listed, the date must days after the date of filing.) The date inserted in this block does not meet the effective date on the Department of State of ELE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of a me	t be specific and cannot be more than five business of the applicable statutory filing requirements, this date will not be e's records. er or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. mation submitted in a document to the Department of State

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

ARTICLE IV-

Company:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)
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