# L19000076568

(Requestor's Name)
,
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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Office Use Only



600325919626

03/13/15--01034--005 \*\*160.00



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 22, 2019

JUDITH SILVER 700 BLANDING BLVD, STE 13-313 ORANGE PARK, FL 32065

SUBJECT: COOLLAWYER LLC Ref. Number: W19000028263

We have received your document for COOLLAWYER LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The wrong forms have been received for this filing. Enclosed are the correct forms. Please complete and return. No additional fee is required.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return 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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 419A00005719

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# **COVER LETTER**

	Filing So sion of C	ection orporations			
SUBJECT:	Coollawy	er LLC			
		(Name of Res	sulting Florida Limite	ed Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return	all corre	espondence concernin	g this matter to:		
Judith Silver					
		(Contact Person)	·		
		(Firm/Company)			
700 Blanding	Blvd, STE	13-313			
		(Address)			
Orange Park, I	FL 32065				
	(0	City, State and Zip Code)			
judith@silverl	awyer.com	l			
E-mail Add	iress: (to b	e used for future annual re	port notifications)		
For further is	nformatio	on concerning this ma	tter, please call:		
Judith Silver			_at (	630-3	3551
(Nam	e of Conta	et Person)	(Area Code)		time Telephone Number)
		or the following amou a bank located in the		rocess	sed by this office must be payable in US
\$150.00 Fil (\$25 for Conve & \$125 for Art of Organization	rsion icles	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET A New Filing S Division of C Clifton Build 2661 Execut	Section Corporati ling	ons	New Fil Division P. O. Bo	ing S n of C ox 63:	Corporations 27
ZOOT EXECUI	ive Cente	a Circle	i aiianas	ssee, I	FL 32314

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 Business Entity" immediately prior to the filing of the Articles of Conversion is: Coollawyer 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
(Enter state, or if a non-U.S. entity, the name of the country)
04/15/2002 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Coollawyer 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 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.
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.

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Section And the State
ALLAHASSE ELEGINA
IALLAHASSE

Signed this 22nd day of March	h 20_19
•	ntative of Limited Liability Company:
Signature of Authorized Representa	ative: JUDITH SILVER Deputs in ACT OF A STATE OF THE SILVER OF THE SILVE
Printed Name: Judith Silver	Title: <u>CEO</u>
	isiness Entity: [See below for required signature(s)]
Signature: JUDITH SILVER	Description of the control of the co
Printed Name: Judith Silver	Title: President
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairm	nan, Director, or Officer. n selected, an Incorporator must sign.
	, , , , , , , , , , , , , , , , , , ,
If Florida General Partnership or Signature of one General Partner.	Limited Liability Partnership:
If Florida Limited Partnership or Signatures of ALL General Partners	Limited Liability Limited Partnership:
All others:	
Signature of an authorized person.	-
Fees:	

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Articles of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Organization:

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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Lia	bility Company is:		
Coollawver LLC		·· <del>-</del>	
(Must o	contain the words "Limited I	Liability Company, "I	L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stre	et address of the principal of	ffice of the Limited I.	iability Company is:
<u>Prir</u>	ncipal Office Address:		Mailing Address:
700 Blanding Bl	vd. Suite 13-313	700 B	landing Blvd, Suite 13-313
Orange Park, Flo		Orang	e Park, Florida 32065
ARTICLE III - Registered	Agent, Registered Office,	& Registered Agent	's Signature:
The Limited Liability Comp	Agent, Registered Office, only cannot serve as its own an active Florida registratio	Registered Agent, Yo	's Signature: ou must designate an individual or
The Limited Liability Companother business entity with	oany cannot serve as its own	Registered Agent, Yon.)	's Signature: ou must designate an individual or
The Limited Liability Companother business entity with	oany cannot serve as its own an active Florida registratio	Registered Agent, Yound, n.) agent are:	's Signature: ou must designate an individual or
The Limited Liability Companother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered	Registered Agent, Yound, n.) agent are:	's Signature: ou must designate an individual or
The Limited Liability Companother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered	Registered Agent, Yon.)  agent are:  rporated  Name	's Signature: ou must designate an individual or
(The Limited Liability Companother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered Business Filings Inco	Registered Agent, Yon.) agent are: rporated Name	ou must designate an individual or
(The Limited Liability Companother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered Business Filings Inco	Registered Agent, Yon.) agent are: rporated Name	ou must designate an individual or

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..

(heltia Gultan, Asst. Soc. Boxiness Filings Incorporated Registered Agent's Signature (REQUIRED)

(CONTINUED)

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# ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR/MGR Judith Silver 700 Blanding Blvd, STE 13-313 Orange Park, FL 32065 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) 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. ARTICLE VI: Other provisions, if any,

REQUIRED SIGNATURES

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. 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.

Judith Silver

Typed or printed name of signee

#### Filing Fees:

\$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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#### 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000040768

Entity Name: COOLLAWYER INC.

**Current Principal Place of Business:** 

700 BLANDING BLVD

13-313

ORANGE PARK, FL 32065

**Current Mailing Address:** 

700 BLANDING BLVD 13-313

ORANGE PARK, FL 32065 US

FEI Number: 68-0500108

Certificate of Status Desired: No

**FILED** Mar 22, 2019

Secretary of State

9529385866CC

Name and Address of Current Registered Agent:

SILVER, JUDITH 700 BLANDING BLVD STE 13-313 13-313 ORANGE PARK, FL 32065 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Name CEO

SILVER, JUDITH

Address

700 BLANDING BLVD

STE 13-313 13-313

City-State-Zip: ORANGE PARK FL 32065

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JUDITH SILVER

CEO

03/22/2019