# L21000198044

(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:
1004
7/19/

Office Use Only



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2021 APR 29 AM 6: 24

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April 2, 2021

**BRENDAN SAUNDERS** 10304 SHALIMAR WOOD DR THONOTOSASSA, FL 33592

SUBJECT: DRAGONHIDE DICE CO. LLC

Ref. Number: W21000044321

We have received your document for DRAGONHIDE DICE CO. LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Domestications can only be filed for corporations. You will need to file the conversion forms to convert the LLC.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Tammi Cline Regulatory Specialist II Supervisor

Letter Number: 321A00006923

www.sunbiz.org



### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 22, 2021

BRENDAN SAUNDERS 10304 SHALIMAR WOOD DR THONOTOSASSA, FL 33592

SUBJECT: DRAGONHIDE DICE CO. LLC

Ref. Number: W21000044321

We have received your document for DRAGONHIDE DICE CO. LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Tammi Cline Regulatory Specialist II Supervisor . 5. ZUZI APR 29 AM 8: 2

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Letter Number: 921A00008346

Division of Communities - D.O. DOV 0007 Mallaharan Florida 9001

### **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: Dragon Ide Dree Co. L.C. (Name of Resulting Florida Limited Company)			
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to cor Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045	ivert an 5, F.S.	"Other	•
Please return all correspondence concerning this matter to:			
Brendan Saunders (Contact Person)		2651 A	
Dragonhide Dice Co. LLC 10304 Shalimar wood dr.		F2 29	; ;
10304 Shalimar wood dr.	;	## 6: 2	
Thonotosassa FL 33592 (City, State and Zip Code)	÷7.	24	
E-mail Address: (to be used for future ariginal report notifications)			
For further information concerning this matter, please call:			
(Name of Contact Person) at (S13) 950-4730 (Area Code) (Daytime Telephone Number)			
Enclosed is a check for the following amount: (All checks processed by this office must be dollars and drawn on a bank located in the United States)  According Form States    State 00 Filing Form     State 00 Filing Form     State 00 Filing Form    State 00 Filing Form	payable	in US	Linc
S150,00 Filing Fees (\$25 for Conversion & S125 for Articles of Organization)  S150,00 Filing Fees and Certified Copy  S180,00 Filing Fees and Certified Copy  Certified Copy, and Certificate of Status	r ev 100	17 41	'''

Mailing Address:
New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

2021 APR 29 AH 6: 24

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 Conversion is:
Enter Name of Other Business Entity)
2. The "Other Business Entity" is a him'ted hability Company (Lice tenter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on Uol W 2020 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Dragonhide Dice Co. LC (Enter Name of Florida Limited Liability Company)
(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.

Signed this 9th day of April	20 21
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative:  Printed Name: Brendan Sauntles	Title: Owner
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Brandan Shunders	Title: Owner
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	_ Title:
01	
Signature: Printed Name:	Title:
Trinco ivane.	
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc  If Florida General Partnership or Limited Liabilit Signature of one General Partner.	corporator must sign.
If Florida Limited Partnership or Limited Liability 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 1 - Name:

The name of the Limited Liability Company is:

Dragnhide Dia Co. L (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Dragenhide Dice Colle 10304 Shallmar Wood Dr Thunotusesse, FL 33592 ARTICLE III - Registered Agent, Registered	Dragon hide Dice (0 11C) 100 364 Shallman wood Or. Thonofosassa, Fl 33592 Office. & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	
Thordo SSSSa  City	Box NOT acceptable)  FL 33592  Zip

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)

Having been named as registered agent and to accept service of process for the above stated limited

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMB/2	Brendan Saynders 10304 Shalimar Wood Dr. Translosessa, FL 33592
<del></del>	· · · · · · · · · · · · · · · · · · ·
	<u> </u>
(Use attachment if necessary)	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance any false information submitted in a document.	r an authorized representative of a member rewith section 605.0203 (1) (b). Florida Statutes. I am aware tument to the Department of State constitutes a third degree for
Signature of a member or This document is executed in accordance any false information submitted in a document approvided for in s.817.155, F.S.	r an authorized representative of a member rewith section 605.0203 (1) (b). Florida Statutes, I am aware ument to the Department of State constitutes a third degree for
Signature of a member or This document is executed in accordance any false information submitted in a document approvided for in s.817.155, F.S.	r an authorized representative of a member re with section 605,0203 (1) (b), Florida Statutes. I am aware

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

ARTICLE IV-