

L21000411219

(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



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07/23/21--01017--022 **150.00

2021 AUG 16 PM 4:46
COURT CLERK

W21-107434



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 30, 2021

ROBERT ATKINSON
TREASURE SWAPPER LLC
3912 WILLOW WALK DRIVE
PALMETTO, FL 34221

SUBJECT: TREASURE SWAPPER LLC
Ref. Number: W21000107434

2021 JUL 30 PM 1:14

We have received your document for TREASURE SWAPPER 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):

Please complete the marked sections in the Articles of Conversion. A signature is missing.

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: 321A00018007

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*Please see attached signatures.
Thank you*

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Treasure Swapper LLC
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and Fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with 605.1045, F.S.

Please return all correspondence concerning this matter to:

Robert ATKINSON
(Name)

Treasure Swapper LLC
(Firm Company)

3912 Willow Walk Drive
(Address)

Palmetto FL 34221
(City, State and Zip Code)

downhomepickers15@gmail.com
(Email Address - to be used for future correspondence)

For further information concerning this matter, please call:

Sandra ATKINSON at (678) 215-2063
(Name of Contact Person) (Area Code) (Private Telephone Number)

Enclosed is a check for the following amount. (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☒ \$800 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$150 Filing Fees
and Certificate of
Status

☐ \$150 Filing Fees
and Certificate of
Status

☐ \$150 Filing Fees
and Certificate of
Status

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 627
Tallahassee, FL 32304

Street Address:

New Filing Section
Division of Corporations
Tallahassee
177 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Conversion
into
"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:

Treasure Swapper LLC
(Enter full legal name of "Other Business Entity")

2. The "Other Business Entity" is a Limited Liability
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Georgia
(Enter full legal name of U.S. entity, the name of the country)

on 5/22/2020
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company, as set forth in the attached **Articles of Organization**:

Treasure Swapper 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 605.1011-605.1012, F.S.

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CLERK OF THE COURT
CLERK OF THE COURT

Signed this 20th day of July, 2021

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Robert Atkinson
Printed Name: Robert Atkinson Title: Managing Partner

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: Robert Atkinson X
Printed Name: Robert Atkinson X Title: Managing Partner X

Signature: Sandra Atkinson
Printed Name: Sandra Atkinson Title: Authorized Rep.

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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Aug 16 2021

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Treasure Swapper LLC
(Must contain the words "Limited Liability Company" or "LLC")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3912 Willow Walk Dr
Palmetto FL 34221

Mailing Address:

3912 Willow Walk Dr
Palmetto FL 34221

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with a physical Florida registered office.

The name and the Florida street address of the registered agent are:

Robert Atkinson
Name

3912 Willow Walk Dr.
Florida street address (P.O. Box NOT acceptable)

Palmetto FL 34221
City Zip

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CLERK OF COURT
CLERK OF COURT

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.,

Robert Atkinson
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" Authorized Member

"MGR" Manager

MGR

AMBR

Name and Address:

Robert Atkinson
3912 Willow Walk Dr
Palmetto FL 34221

Sandra Atkinson
3912 Willow Walk Dr.
Palmetto FL 34221

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

Robert Atkinson

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.03, Florida Statutes. I am aware that any false information submitted in this document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

Robert Atkinson

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)