

A10000000581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

SEP 30 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOVESIGNALS MARKETING AGENCY, LLLP
Name of Resulting Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Conversion, Certificate of Limited Partnership, and fees are submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S.

Please return all correspondence concerning this matter to:

Guy E. Whitesman

Contact Person

Henderson, Franklin, Starnes & Holt, P.A.

Firm/Company

P.O. Box 280

Address

Fort Myers, FL 33902-0280

City, State and Zip Code

guy.whitesman@henlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GUY E. WHITESMAN

Name of Contact Person

at (239)

344-1180

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$1,052.50 Filing Fees ☐ \$1,061.25 Filing Fees ☒ \$1,105.00 Filing Fees ☐ \$1,113.75 Filing Fees,
(\$52.50 for Conversion and Certificate of Status and \$1,000 - Certificate) and Certified Copy Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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10 SEP 29 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT NO:

Certificate of Conversion
for
"Other Business Organization"
into
Florida Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Limited Partnership in accordance with s. 620.2104, F.S.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

MoveSignals Marketing Agency, LLC

L10000010266

2. The "Other Business Entity" is a limited liability company first organized under the laws of Florida on January 27, 2010.

3. The name of the Florida Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:

MoveSignals Marketing Agency, LLLP

4. The conversion was approved as required by Chapter 608 and Chapter 620, F.S.

5. The plan of conversion was approved by the converting "Other Business Entity" in accordance with Chapter 608, F.S.

6. This conversion shall be effective upon the filing of the Certificate of Conversion with the Florida Department of State.

Signed this 24 day of September, 2010.

MoveSignals Marketing Agency, LLC

MoveSignals Marketing Agency, LLLP

By: ✓

Don W. Binns

Authorized Representative

By: ✓

Don W. Binns, its General Partner

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TALLAHASSEE, FLORIDA

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FAX AUDIT NO.:

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. MoveSignals Marketing Agency, LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.*

2. 14524 Riverside Drive
(Street address of initial designated office)

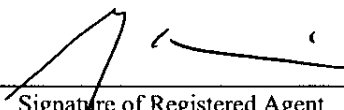
Fort Myers, Florida 33905

3. Guy E. Whitesman
(Name of Registered Agent for Service of Process)

4. 1715 Monroe Street
(Florida street address for Registered Agent)

Fort Myers, Florida 33901

5. *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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



Signature of Registered Agent

6. 14524 Riverside Drive
(Mailing address of initial designated office)

Fort Myers, Florida 33905

7. If limited partnership elects to be a limited liability limited partnership, check box ☒

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TALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

Don W. Binns

14524 Riverside Drive

Fort Myers, Florida 33905

9. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Signed this 24 day of September, 2010

Signature of each general partner: _____

DON W. BINNS

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

\$52.50

\$8.75

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CLERK OF STATE
TALLAHASSEE, FLORIDA