

A17000000230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

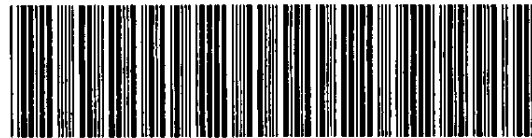
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wrong form

Office Use Only



300297364903

04/10/17--01020--010 **25.00

05/05/17--01002--006 **1027.50

FILED

2017 MAY -5 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
MAY 15 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2017

AXIOM BUSINESS CONSULTING LLC
SEEMA JAIN
13234 TELECOM DR.
TAMPA, FL 33637

SUBJECT: TIE TAMPA BAY ANGEL FUND LLC
Ref. Number: L16000216264

We have received your document for TIE TAMPA BAY ANGEL FUND LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

Please note difference in prices.

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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 017A00007004

RL
2017 MAY -2 AM 10:05
SECRET
TALLAHASSEE, FLORIDA

\$ 1,052.50
25 less
1,027.50

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TIE TAMPA BAY ANGEL FUND I, LP

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:

Contact Person

TTBAF MANAGEMENT LLC

Firm/Company

13234 TELECOM DRIVE

Address

TAMPA, FL 33637

City, State and Zip Code

SJCPA@AXIOMBUSINESSCONSULTING.COM

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

For further information concerning this matter, please call:

SEEMA JAIN

Name of Contact Person

at (813) 395-0089

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$1,052.50 Filing Fees | <input type="checkbox"/> \$1,061.25 Filing Fees | <input type="checkbox"/> \$1,105.00 Filing Fees | <input type="checkbox"/> \$1,113.75 Filing |
| Fees, (\$52.50 for Conversion | and Certificate of | and Certified Copy | Certified Copy, and |
| and \$1,000 - Certificate) | Status | | 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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Conversion
For
"Other Business Organization"
Into

Florida Limited Partnership or 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 Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

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

TIE TAMPA BAY ANGEL FUND, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)

on 11/29/2016
(Enter date "Other Business Entity" was first organized, formed or incorporated)

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

TIE TAMPA BAY ANGEL FUND I, LP

(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)

4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.

5. If not effective on the date of filing, enter the effective date: _____
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Limited Partnership, if an effective date is listed therein.)


6. The conversion is permitted by the applicable law(s) governing the other business entity and the other business entity complies with such law(s) in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

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2017 MAY -5 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 20TH day of APRIL, 2017.

Signature of Each General Partner Listed in Attached Certificate of Limited Partnership/Limited Liability Limited Partnership: Individual(s) signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature: 
Printed Name: SEEMA JAIN Title: CFO FOR TTBAF MANAGEMENT LLC

Signature: _____
Printed Name: _____ Title: _____


Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Required Signature(s) on behalf of Other Business Entity: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]

Signature: 
Printed Name: SEEMA JAIN Title: LIMITED PARTNER

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 Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$ 52.50
Fees for Florida Certificate of Limited Partnership: ((\$965 Filing Fee and \$35 Filing Fee)	\$1,000.00
Certified Copy:	\$ 52.50 (Optional)
Certificate of Status:	\$ 8.75 (Optional)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. TIE TAMPA BAY ANGEL FUND I, LP

(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. 2410 NORTHSIDE DR, CLEARWATER, FL 33761

Street address of initial designated office

3. TTBAF MANAGEMENT LLC

Name of Registered Agent for Service of Process

4. 13234 TELECOM DRIVE

Florida street address for Registered Agent

TAMPA, FL 33637

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. 13234 TELECOM DR, TAMPA, FL 33637

Mailing address of initial designated office

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:

TTBAF MANAGEMENT LLC

2410 NORTHSIDE DRIVE

CLEARWATER, FL 33761

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 20TH day of APRIL, 2017

Signature of each general partner: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.



For TTBAF Management LLC