

L04000086109

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

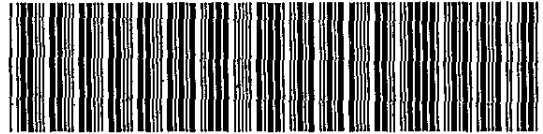
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000042341260

11/01/04--01053--029 **125.00

11/19/04--01011--019 **25.00

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TALLAHASSEE, FLORIDA

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L04-86109
GR
F\$150.00



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

November 4, 2004

AMANDA MORROW
1405 HARRINGTON PARK DRIVE
JACKSONVILLE, FL 32225

SUBJECT: HARRISON MORROW, LLC
Ref. Number: W04000040535

We have received your document for HARRISON MORROW, LLC and check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fee to file the conversion is \$25.00 and \$125.00 to file Article of Organization a total of \$150.00,

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) 245-6020.

Tammī Cline
Document Specialist

Letter Number: 804A00063340

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Harrison Morrow, LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amanda Morrow, Managing Member

(Name of Person)

Harrison Morrow, LLC

(Firm/Company)

1405 Harrington Park Drive

(Address)

Jacksonville, Florida 32225

(City/State and Zip Code)

For further information concerning this matter, please call:

Amanda Morrow
~~Mildred Harrison~~

(Name of Person)

at (904)

220-3132

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing
Certificate of Status &
Certified Copy
(additional copy is enclosed)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

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

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TALLAHASSEE, FLORIDA

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CERTIFICATE OF CONVERSION

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the attached articles of organization and this certificate of conversion to convert to a Florida limited liability company:

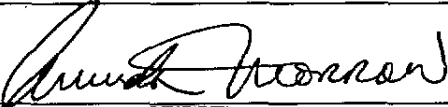
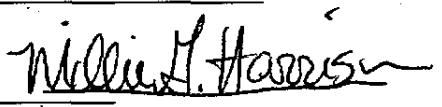
FIRST: The name of the unincorporated business immediately prior to filing this document was:
Harrison Morrow, LLC (formerly known as Morrow Digital, LLC)

SECOND: The date on which and the jurisdiction in which the unincorporated business was first created or otherwise came into being are:

- A. Date: June 1, 2003
- B. Jurisdiction: Connecticut
- C. If different from the above noted jurisdiction, the jurisdiction immediately prior to its conversion: _____

THIRD: The name of the limited liability company as set forth in the attached articles of organization is:

Harrison Morrow, LLC

 
Signature of a Member or an Authorized Representative of a Member
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
~~Millie G. Harrison~~ AMANDA MORROW , MILLIE G. HARRISON
Typed or Printed Name of Signee

FILING FEES:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Filing Fee for Registered Agent Designation
\$ 25.00 Filing Fee for Certificate of Conversion
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.)

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Harrison Morrow, LLC

ARTICLE II - Address:

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

Principal Office Address:

1405 Harrington Park Drive
Jacksonville, Florida 32225

Mailing Address:

1405 Harrington Park Drive
Jacksonville, Florida 32225

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

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

~~Mildred Harrison, Member~~ AMANDA MORROW MEMBER MANAGER
Name

1405 Harrington Park Drive
Florida street address (P.O. Box NOT acceptable)
Jacksonville, FL 32225
City, State, and Zip

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 608, F.S.



Registered Agent's Signature

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(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Amanda Morrow

1405 Harrington Park Drive

Jacksonville, Florida 32225

MGR

Mildred Harrison

1405 Harrington Park Drive

Jacksonville, Florida 32225

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Amanda Morrow, Member Manager
~~Mildred Harrison~~

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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