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FJ)	lequestor's Name)	
(A	Address)	
A)	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(C	Document Number)	
Certified Coples	Certificates of	Status
Special Instructions t	o Filing Officer:	
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		1119
	Office Use Only	X



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SECRETER OF STATE

JAN -9 PM 3:

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: R. TAYLOR -LLC (Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
ROBERT R. TAYLORL (Comaci Person) Deep SEA LOCKER (Firm/Company)
1707 RHETT PIACE (Address)
City, State and Zip Code) Zim A Sign Sign Sign Sign Sign Sign Sign Sign
For further information concerning this matter, please call:
ROBERT TAYLOR — at (850) 625-7033 SH & Code and Daytime Telephone Number) SH SH
Enclosed is a check for the following amount:
\$150.00 Filing Fees \$\int \\$155.00 Filing Fees \$\int \\$180.00 Filing Fees \$\int \\$185.00 Filing Fees, \$(\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and & \$125 for Articles Status Certificate of Status of Organization)
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

2

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate 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.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:	
DEEP SEA LOCKER.	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a <u>Sole proprietorship</u> (Enter entity type. Example: corporation, limited partnership, sole proprietorship general partnership, common law or business trust, etc.)	OS JAN-
first organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity, the name of the country)	-9 PM
on Ol Ol Ol Ol Ol (Enter date "Other Business Entity" was first organized, formed or incorporated)	3: 06
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:	
N/A	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	•
R. TAYLORLLC	
(Enter Name of Florida Limited Liability Company)	

Page 1 of 2

5. If not effective on the date of filing, enter the elective date: 1) cannot be prior to nor m document is filed by the Florida Department of effective date listed in the attached Articles of Clisted therein.)	nore than 90 days after the date this State; <u>AND</u> 2) must be the same as the	
Signed this 5Ty day of JAN	_20_0le	
Signature of Authorized Person:		
Printed Name: ROBERT TAYLOR Title	e: MANAGER EM S	•
	JAN -9 PH 3: 06 ORE PLORIDA ANASSEE PLORIDA	
Fees:	AUE ADA	
Certificate of Conversion:	\$25.00	

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Page 2 of 2

Fees for Florida Articles of Organization:

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TAYLOR

Principal Office Address	1	Mailing Addi	ess:	
MOT RHETT P MAN HAVEN, FL	IAUL	1707 RH - WAA HAI	ETT PLACE	
3.5	<u>-444</u>		32449	
ARTICLE III - Registere	ed Agent, Regis	tered Office, & Regi	stered Agent's	NECKTON OF ST
Signature:				爱
The Limited Liability Company or individual or another	mnot serve as its own	Registered Agent. You mus	t designate an	
business entity with an active Flor	rida registration.)		_	a⊊ ?
			C	263
The name and the Florida	street address of	the registered agent	are:	第 0
The name and the Florida	street address of	the registered agent:	are:	3:06
(CINDY	TAYLOR Name	are:	3: 06
	CINDY 107 RHETH	TAYLOR Name - Place	<i>A</i>	3: 06
	CINDY 107 RHETH	TAYLOR Name	<i>A</i>	3: 06
	CINDY 107 RHETH	TAYLOR Name - Place (P.O. Box <u>NOT</u> acce	<i>A</i>	3: 06

(CONTINUED) Page 1 of 2

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Curidy 7 Taylor Registered Agent's Signature (REQUIRED)

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" = Manager	Name and Address:
"MGRM" = Managing Member <u> </u>	ROBERT TAYLOR 1707 RHETT PLAVE 1900 HAVEN, FL. 32444
ARTICLE V: Effective date, if other than the d	(Use attachment if necessary) The sate of filing: 15 TAN 00 T
(OPTIONAL) (If an effective date is listed, the date must be business days prior to or 90 days after the date	e specific and cannot be more than five.
REQUIRED SIGNATURE:	
Signature of a member or an auth	orized representative of a member.
of this document constitutes an affir	18(3), Florida Statutes, the execution mation under the penalties of perjury ed herein are true.)
ROBERT THUC	
Typed or printe	d 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)