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| (Requestor's Name) | | | | | |
|---|--|--|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
| POU-1336 (Document Number) | | | | | |
| Certified Copies Certificates of Status | | | | | |
| Special Instructions to Filing Officer: | | | | | |
| 3/17 FL LC Conversion | | | | | |
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Office Use Only

M. HOUGES



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COVER LETTER

| TO: | Registration Section Division of Corporations | |
|-----------------------------------|---|--|
| STIP | ECT: MATT HINMAN, I | LLC |
| SUDI | | esulting Florida Limited Company) |
| conve | | ion, Articles of Organization, and fees are submitted to into a "Florida Limited Liability Company" in |
| Please | e return all correspondence con | cerning this matter to: |
| MOI | NA S. GODARD | |
| | (Contact Person | |
| | (Firm/Company | ·) |
| 343 | 9 QUAIL CT | |
| | (Address) | |
| MEL | LBOURNE, FL 32935 | |
| | (City, State and Zip | Code) |
| For fu | urther information concerning the | his matter, please call: |
| МО | NA S. GODARD | _ _{at (} 321 ₎ 242-4825 |
| | (Name of Contact Person) | (Area Code and Daytime Telephone Number) |
| Enclo | sed is a check for the following | g amount: |
| (\$25 fc & \$125 | 0.00 Filing Fees Status 1.00 Filing Fees Status 1.00 Filing Fees and Certificate of Status | |
| Regis Divisi Clifto 2661 | EET ADDRESS: tration Section ion of Corporations on Building Executive Center Circle hassee, FL 32301 | MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 |

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 the | nis | | | | |
|--|-------------|--|--|--|--|
| Certificate of Conversion is: MATT HINMAN, INC | | | | | |
| (Enter Name of Other Business Entity) | | | | | |
| 2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, sole prop | | | | | |
| general partnership, common law or business trust, etc.) | rictorship, | | | | |
| 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 01/01/04 (Enter date "Other Business Entity" was first organized, formed or incompanies of the control of th | mnamatad) | | | | |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or counder the laws of which it is now organized, formed or incorporated: | | | | | |
| 4. The name of the Florida Limited Liability Company as set forth in the attack Articles of Organization: | hed | | | | |
| MATT HINMAN, LLC | . 1 | | | | |
| (Enter Name of Florida Limited Liability Company) | | | | | |

Page 1 of 2

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| document is filed by | the date of filing, enter the e 1) cannot be prior to nor n the Florida Department of in the attached Articles of (| State; <u>AND</u> 2) mu | ist be the same as the |
|----------------------|---|-------------------------|------------------------|
| Signed this 15 | _day of MARCH | 06 | |

Signature of Authorized Person: Matthew S

Printed Name: MATTHEW S HINMAN Title: PRESIDENT

Fees:

Certificate of Conversion: \$25.00

Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional) Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MATT HINMAN, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1102 BAYSINGER ST NW

PALM BAY, FL 32907

1102 BAYSINGER ST NW PALM BAY, FL 32907

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 an active Florida registration.)

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

MATTHEW S. HINMAN

1102 BAYSINGER ST NW

Florida street address (P.O. Box NOT acceptable)

PALM BAY, 32907

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

Registered Agent's Signature (REQUIRED)

Chapter 608, F.S.,

(CONTINUED)
Page 1 of 2

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

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

| <u>Title:</u> "MGR" = Manager | Name and Address: | |
|---|---|--|
| "MGRM" = Managing Member | | |
| MGRM | MATTHEW S HINMAN 1102 BAYSINGER ST NW | |
| | | |
| | PALM BAY, FL 32907 | |
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| | (Use attachment if necessary) | |
| TICLE V: Effective date, if other than the TONAL) n effective date is listed, the date must ness days prior to or 90 days after the d | be specific and cannot be more than five | |
| less days prior to or 90 days after the d | rate of fining.) | |
| REQUIRED SIGNATURE: | // ` | |
| Mass | // | |
| ff the few of | the wigad was week time of a mambau | |
| Signature of a member of an au | thorized representative of a member. | |
| of this document constitutes an af | 408(3), Florida Statutes, the execution ffirmation under the penalties of perjury lated herein are true.) | |
| MATTHEW S. HINMAN | | |
| Typed or prin | nted 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)