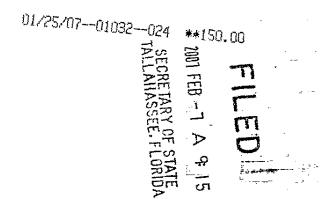
# LO 1000014503

| (R                      | (equestor's Name)    |           |
|-------------------------|----------------------|-----------|
| (A                      | ddress)              |           |
| (A                      | ddress)              |           |
| (0                      | city/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT               | MAIL      |
| (8                      | usiness Entity Nan   | ne)       |
| ·                       | ·                    | ·         |
| (0                      | locument Number)     |           |
| Certified Copies        | Certificates         | of Status |
| Special Instructions to | Filing Officer:      |           |
|                         | 007-4u°              | AL 1:     |

Office Use Only



800084590028





January 26, 2007

KATHERINE A. WHITEHEAD 110 MARTELLAGO DR. NORTH VENICE, FL 34275

SUBJECT: GRACEFUL INTERIORS LLC

Ref. Number: W07000004497

SECRE LARGE F. F. LORIDS

We have received your document for GRACEFUL INTERIORS LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must submit Articles of Organization for the resulting Florida limited liability company along with the Certificate of Conversion. The Articles of Organization must be signed by a member or an authorized representative of a member.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 807A00006447

# COVER LETTER

| Division of Corporations  |   |
|---|---|
| SUBJECT: <u>GRACEFUL</u> (Name of Resulting   | INTERIORS Florida Limited Company)  |
| The enclosed Certificate of Conversion, Art convert an "Other Business Entity" into a "laccordance with s. 608.439, F.S.          | ticles of Organization, and fees are submitted to Florida Limited Liability Company" in                         |
| Please return all correspondence concerning   | g this matter to:   |
| KATHERING A. WHITE (Contact Person)  GRACE FUL INTERIO (Firm/Company)   |   |
| UN MARTHIAGA  | DOWE -  |
| (Address)  NORTH VENICE, FL  (City, State and Zip Code)  For further information concerning this mat                              | in the second |
| _   | \ai ( 941 ) 400 - 3999  (Area Code and Daytime Telephone Number)  |
| Enclosed is a check for the following amount  | nt:   |
| \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$155.00 Filing Fees and Certificate of Status   | S180.00 Filing Fees 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             |

# Certificate of Conversion For

# "Other Business Entity"

Into

# Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

|  | siness Entity" immediately prior to the filing of this   |
|--|--|
| Certificate of Conversion is:                            | GRACEFUL - INTERIORS   |
| (Ent   | er Name of Other Business Entity)  |
| (Enter entity type. Exampl                               | " is a <u>SOLE PROPRIETORSHIP</u> e: corporation, limited partnership, sole proprietorshi<br>ership, common law or business trust, etc.) |
| first organized, formed or inco (Enter state, or         | rporated under the laws of Flore DA Fig. 18 a non-U.S. entity, the name of the country)  |
| on TULY 4, 20<br>(Enter date "Other Busine               | ss Entity" was first organized, formed or incorporated   |
| =  | ther Business Entity" was changed, the state or retificing tow organized, formed or incorporated:  |
| 4. The name of the Florida Lin Articles of Organization: | nited Liability Company as set forth in the attached   |
| GRAC   | EFUL INTERIORS LLC   |
| (Enter Nam   | e of Florida Limited Liability Company)  |

| 5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor m document is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.) | ore than 90 days after t<br>State; <u>AND</u> 2) must be t     | the same as the  |
|--|--|--|
| Signed this  | 12007  | sam <del>an</del>  |
| Signature of Authorized Person:  | Sharker  |  |
| Printed Name: KATHERINE A. WHITEHENINE   | : DWNEL  |  |
| Fees:  Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:  | \$25.00<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) | 2001 FEB -7 A 9 15 SECRETARY OF STATE TALLAHASSEE, FLORIDA |

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limited Liability C                           | Company is:   |
|---|---|
| GRACEFUL I  | MTERIORS LLC impany, "Limited Company" or their abbreviation "LLC," or "L.C.,") |
| (Must end with the words "Limited Liability Co                | impany, "Limited Company" or their abbreviation "LLC," or "L.C.,")              |
| ARTICLE II - Address:<br>The mailing address and street addre | ess of the principal office of the Limited Liability Company is:                |
| Principal Office Address:                                     | Mailing Address:  |
|   | • •   |

ARTICLE I - Name:

| 110 MARTELLAGO DIC 110 MARIE   | 4-17      | <del>2</del> Q_  | D/C.      |
|--|-----------|------------------|-----------|
| NORTH VENICE PL 34275 NORTH VEN  | KE        | FL -             | 3427      |
|  |           |                  |           |
|  |           | -                | •         |
| ARTICLE III - Registered Agent, Registered Office, & Registered Age                              | nt s Sig  | natur            | e:        |
| (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an i | ndiyadial | of anothe        | St. 445   |
| business entity with an active Florida registration.)  | 포띠        |                  | ********* |
| The name and the Florida street address of the registered agent are:                             | SS        | ı,               | -         |
|  |           | 3                |           |
| KATHERINE A. WHITEHEAD   | m = 1     | $\triangleright$ |           |
| Name   | .02<br>S. | ب                | U         |
|  |           |                  |           |
| 110 MARTELLAGO DRIVE   |           | G.               |           |
| Florida street address (P.O. Box NOT acceptable)   |           | •                | •         |

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 (REQUIRED)

NORTH VENICE, FL 3427
City, State, and Zip

(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:

| Title:   | Name and Address:  |  |
|--|--|--|
| "MGR" = Manager "MGRM" = Managing Member   |  | elen e   |
| MGR  | MATHERINE A. WHITEHEST<br>110 MARTELLAGE DE<br>NORTH VENKE TO 34275  | <b>\$</b> ∆  |
|  | ETAPY DHASSEE  | <b>=</b><br>N  |
|  | FISTALE IS   |  |
| and the second s |  | The state of the s |
|  |  | ر د اختیار کا در از  |
| (Use attachment if necessary)  | <b>,</b><br>   |  |
| TCLE V: Effective date, if other than the date effective date is listed, the date must be sp 90 days after the date of filing.)  | e of filing: (OPTION decific and cannot be more than five business decific and cannot be more than the contract and cannot be contracted and cann |  |
| 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.)

TYPE H. WHITEHERY

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)