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(Re	questor's Name)	
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(City	y/State/Zip/Phone	∍ <i>#</i>)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to I	Filina Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Cousin's Coffee (Cafe', LLC	
	ing Florida Limited Company)	
•	Articles of Organization, and fees are submitted to a "Florida Limited Liability Company" in	
Please return all correspondence concern	ning this matter to:	
Evelyn Nash		
(Contact Person)		
Cousin's Coffee Cafe'		
(Firm/Company) 545 Clark St.		
(Address)		
Eatonville, FL. 32751		
(City, State and Zip Cod	c)	
For further information concerning this	matter, please call:	
Evelyn Nash	at (407) 599-0945	
(Name of Contact Person)	(Area Code and Daytime Telephone Number)	
Enclosed is a check for the following am	nount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\sum{1}{2}\$\$ \$155.00 Filing Fee and Certificate of Status	s = \$180.00 Filing Fees \$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327	
2661 Executive Center Circle	Tallahassee, FL 32314	
Tallahassee, FL 32301		

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: Cousin's Coffee Cafe', Inc. Po3-757-7
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a COrporation (Enter entity type. Example: corporation, limited partnership, 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 July 2003
(Enter date "Other Business Entity" was first organized, formed or incorporated)
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:
Florida
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Cousin's Coffee Cafe'
(Enter Name of Florida Limited Liability Company)

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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 Articles of Organization, if an effective date is listed therein.)
Signed this 6th day of March 20 07.
Signature of Authorized Person: Thumpy High
Printed Name: Evelyn Nash Title: President/Owner

Fees:

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

\$30.00 (Optional)

Certified Copy: 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:

Cousin's Coffee Cafe', L.L.C.

(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:
545 Clark St., Eatonville, Fl. 32751	_	545 Clark St., Eatonville, FI 32751
	_	

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:

Evelyn Nash	
545 Clark St.,	Name
Florida street address	(P.O. Box NOT acceptable)
Eatonville	FL 32751
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 (REQUIRED)

(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 "MGRM" = Managing Member	Name and Address:
MGR	Evelyn Nash 545 Clark St., Eatonville, Fl. 32751
	575 Gark Oc., Latonville, 11. 52751
	(Use attachment if necessary)
ess days prior to or 90 days after the da	be specific and cannot be more than five te of filing.)
REQUIRED SIGNATURE:	
Signature of a member or an aut	horized representative of a member.
of this document constitutes an affi	08(3), Florida Statutes, the execution irmation under the penalties of perjury ted herein are true.)
Evelyn Nash	
Typed or printe	ed name of signee
Filing Fees:	
\$125.00 Filing Fee for Articles of of Registered Agent	Organization and Designation
\$ 30.00 Certified Copy (Optional \$ 5.00 Certificate of Status (Optional	

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