L0700066773

(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



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06/25/07--01044--024 **150.00

FILED FILED STATE ECRETARY OF STATE

COVER LETTER

Division of Corporations
SUBJECT: SKid's Pub, 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:
Barbara W. Ulman. (Contact Person)
Skid's Rub Ana.
(Firm/Company)
2810 E. Beauss Ave.
(Address)
City, State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (813) 545-7516 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & Status \$180.00 Filing Fees and Certified Copy \$185.00 Filing Fees & 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

FILED

07 JUN 25 PM 12: 52

SECRETARY UF STATE
TALLAHASSEE, FLORIDA

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: Skid's Pub, FNC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION # VOITSO. (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 Flow: de (Enter state, or if a non-U.S. entity, the name of the country)
on 3/1/1992. (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:
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SKid's Pub, LLC
(Enter Name of Florida Limited Liability Company)

Page 1 of 2

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 day of
Signature of Authorized Person: Barbara St. Ulmon
Printed Name: Barbara W. Ulman Title: V, P+ Sec.

Fees:

Certificate of Conversion: Fees for Florida Articles of Organization: \$25.00 \$125.00

\$30.00 (Optional) \$5.00 (Optional)

Certified Copy: Certificate of Status:

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Skids Vub, L.L.C.
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "L.C.," 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:
2810 E. Beauss Ave. Same
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:
Barbara W. Ulman SSE PR Name 108 Country Club Dr. Florida street address (P.O. Box NOT acceptable) PROPERTY OF THE PROPERTY
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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
WICKIN - Managing Memoer	
MGRM	Frank M. Ulman
	108 Country Club Dr
	Plant City, FL 335
MGRM	BARBARA W. Ulman
111 01-11	108 Country Club Du.
	Plant City FL 335L
	.,
	(Use attachment if necessary
	(Osc attachment in necessary,
days prior to or 90 days after REQUIRED SIGNATURE:	the date of filing.)
REQUIRED SIGNATURE.	6
<u> Sailai</u>	a St. Ulman, MGRM
Signature of a member or a	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 perilip
that the fa	cts stated herein are true.)
- Bakbar	
	r printed name of signee
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Filing Fees:	ORID ORID
<u> </u>	
<u> </u>	cles of Organization and Designation
\$125.00 Filing Fee for Artic	nt otional)