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(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:	
Conv. / Firt	

Office Use Only

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: YOUR STORE ONLINE, LCC (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:		
LORRAINE MELVIN (Contact Person)		
YOUR STORE ONLINE (Firm/Company)		
9277 SPRINGVIEW LOOP		
ESTERO FL 33928 (City, State and Zip Code)		
For further information concerning this matter, please call:		
LORRAINE MELVIN at (239) 498-0054 (Name of Contact Person) (Area Code and Daytime Telephone Number)		
Enclosed is a check for the following amount:		
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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 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: YOUR STORE ONLINE		
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a <u>SOLE PROPRIETOR SHIP</u> . (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 <u>FLORIDA</u> (Enter state, or if a non-U.S. entity, the name of the country)		
on <u>APRIL 9 2007</u> . (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: YOUR STORE ONLINE, LCC.		
(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 $26\frac{\text{th}}{\text{day of}}$ day of $342y$ 2007 .
Signature of Authorized Person: Lorrane J. MELVIN Title: PROPRIETOR

Fees:

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

YOUR STORE ONLINE LCC
(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," of the designation

The mailing address and street address of the principal office of the Limited

Mailing Address:

ARTICLE I - Name:

ARTICLE II - Address:

Principal Office Address:

Liability Company is:

The name of the Limited Liability Company is:

9277 SPRINGVIEW LOOP ESTERO FL 33928	SAME
ARTICLE III - Registered Agent, Registered (Signature: (The Limited Liability Company cannot serve as its own Register individual or another business entity with an active Florida registration.)	
The name and the Florida street address of the reg	gistered agent are:
LORRAINE J	T. MELVIN
9277 SPRING V Florida street address (P.O. B	
ESTERO City, State,	FL <u>33928</u> and Zip
Having been named as registered agent and to a above stated limited liability company at the place hereby accept the appointment as registered a capacity. I further agree to comply with the provide proper and complete performance of my dut accept the obligations of my position as regists. Chapter 608, F.S. Registered Agent's Sign	e designated in this certificate, agent and agree to act in this visions of all statutes relating to ies, and I am familiar with and ered agent as provided for in

(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	LORRAINE J. MELVIN 9277 SPRINGVIEW LOOP ESTERO FL 33928	
ARTICLE V. Effective data if other than the de	(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date of filing: OPTIONAL) If an effective date is listed, the date must be specific and cannot be more than five pusiness days prior to or 90 days after the date of filing.)		
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.)		
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)