

LO7000116231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

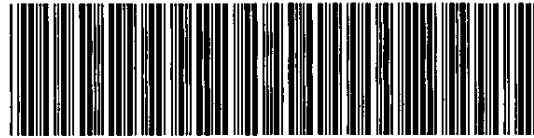
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE FLORIDA

NRC

MorBrown Properties
Sheila M. Mixon-Clay
2550 Brookshire Cir
W. Melbourne, FL 32904
October 10, 2007

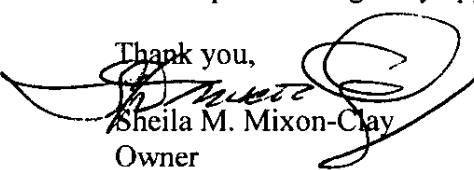
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
Registration Section
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Registration Section:

Unfortunately I have made some errors when listing my company, and I ask for your assistance in correcting these errors. My intentions were to list my company as MorBrown Properties LLC, I have enclosed: Certificate of Conversion and Articles of Organization, along with FEIN, business tax receipt and fictitious name registration.

Hopefully, the information I have provided will assist in correcting this matter. Please feel free to notify me if additional information is needed at (321) 517-9038. Your time and cooperation is greatly appreciated.

Thank you,



Sheila M. Mixon-Clay
Owner

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MORBROWN PROPERTIES 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:

SHEILA M. MIXON-CLAY

(Contact Person)

MORBROWN PROPERTIES LLC

(Firm/Company)

6953 W. NASA BLVD STE# E038

(Address)

WEST MELBOURNE FL 32904

(City, State and Zip Code)

For further information concerning this matter, please call:

SHEILA M. MIXON-CLAY at (321) 517-9038

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$155.00 Filing Fees
and Certificate of
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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

MORBROWN PROPERTIES

607219900103

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a **FICTITIOUS NAME**

(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 **19JULY2007**

(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:

N/A

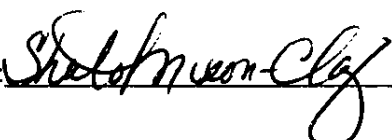
4. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

MorBrown Properties LLC

(Enter Name of Florida Limited Liability Company)

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 10th day of OCTOBER 2007.

Signature of Authorized Person: 

Printed Name: SHEILA MIXON-CLAY Title: OWNER

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:

MorBrown Properties LLC

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

ARTICLE II - Address:

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

Principal Office Address:

6953 W. NASA BLVD STE# E038
WEST MELBOURNE FL 32904

Mailing Address:

2550 BROOKSHIRE CIR
WEST MELBOURNE FL 32904

ARTICLE III - Registered Agent, Registered Office, & Registered Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate individual or another business entity with an active Florida registration.)

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

SHEILA M. MIXON-CLAY

6953 W. NASA BLVD STE# E038

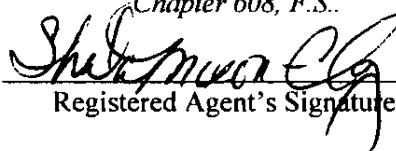
Florida street address (P.O. Box **NOT** acceptable)

WEST MELBOURNE FL 32904

FL

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

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TALLAHASSEE FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

N/A

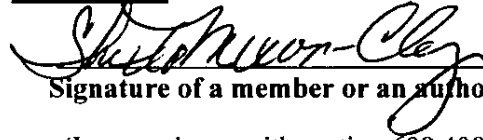
(Use attachment if necessary)

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 business 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.)

SHEILA M. MIXON-CLAY

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)

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