(Re	equestor's Name)	
(Ad	ldress)	
(Δα	Idress)	
(00	iu(e33)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	UNT
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	EXAM	IINER

Office Use Only

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COVER LETTER

Division of Corporations	·
SUBJECT: Gator Daves LLC	
(Name of Result	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:
David King	·
(Contact Person)	
Gator Daves Trading Co	,
(Firm/Company)	2009 SEC
31244 Lake Mack Rd.	IIII JAN - U ECRETARY C LLAHASSEE
(Address)	1558 1 SS
DeLand FL 32720	100 H
(City, State and Zip Cod	
	ORIDE S
For further information concerning this i	matter, please call:
David King	at (352) 636 5085
(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) \$155.00 Filing Fee and Certificate of Status	s S \$180.00 Filing Fees and Certified Copy 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: Gator Daves Trading Co	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a sole proprietorship	
(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 7-6-98	·
(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:	
Gator Daves LLC	
(Enter Name of Florida Limited Liability Company)	

5. If not effective on the date of filing, enter the eff (The effective date: 1) cannot be prior to nor modocument is filed by the Florida Department of Seffective date listed in the attached Articles of Orlisted therein.)	ore than 90 days afte State; <u>AND</u> 2) must l	oe the same as th	ıe
Signed this 1st day of January	20_08		
Signature of Authorized Person:	<u>'</u>		•
Printed Name: David King Title:	Owner		
Fees: Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	ZÜÜB JÄN -U P 3: E SECRETARY OF STATE TALLAHASSEE, FLORID	

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

ARTICLE I - Name:

Gator Daves LLC

The name of the Limited Liability Company is:

DeLand

ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited
Liability Company is:	
Principal Office Address:	Mailing Address:
Gator Daves LLC	Gator Daves LLC
31244 Lake Mack Rd.	31244 Lake Mack Rd.
DeLand FL 32720	DeLand FL 32720
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Regindividual or another business entity with an active Florida registration.)	gistered Agent. You must designate and ASSE
The name and the Florida street address of the	e registered agent are: 9
Dave King	STA COR
31244 Lake Mad	™ Rd . 52

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..

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

FL 3とつとの City, State, and Zip

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:

MGRM	Dave King 31244 Lake Mack Rd.
	DeLand FL 32720
	SECR P
	A N
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	(Use attachment if necessary)
LE V: Effective date, if other the NAL)	han the date of filing:
NAL)	must be specific and cannot be more than five
ffective date is listed, the date	-
ffective date is listed, the date s days prior to or 90 days afte	r the date of filing.)
-	r the date of filing.)

David King

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)