

LO8000008931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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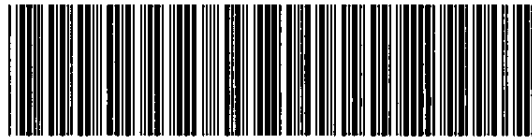
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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B. KOHR  
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TALLAHASSEE, FLORIDA  
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Charter Number Only

1/24 Bruce  
Requestor's Name  
Bruce Lamchick, Esq  
Address  
9130 S Odeland Blvd #1101  
Miami FL 33156  
City State ZIP Phone  
44550

VALIDATION ONLY

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CORPORATION(S) NAME

Wholived LLC

- ☐ Profit ☐ NonProfit ☐ Amendment ☐ Merger  
☐ Foreign ☐ Dissolution ☐ Mark  
☐ Limited Partnership ☐ Annual Report ☒ Other **Conversion**  
☐ Reinstatement ☐ Reservation ☐ Change of Registered Agent  
☐ Certified Copy ☐ Photo Copies ☐ Certificate Under Seal  
☐ Call When Ready ☐ Call If Problem ☐ After 4:30  
☒ Walk In ☐ Will Wait ☒ Pick Up ☐ Mail Out

Name
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Document
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W.P. Verifier



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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:

WHOLIVED INC.

(Enter Name of Other Business Entity)

PO4000166315

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 DECEMBER 10, 2004  
(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:

WHOLIVED LLC

(Enter Name of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the effective date: FILING  
(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 18 day of Jan 2008

Signature of Authorized Person 

Printed Name: Shane Mattaway Title: CEO / President

**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:

**WHOLIVED, LLC**

**ARTICLE II  
Address**

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

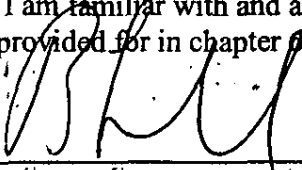
124 Orquidea Avenue  
Coral Gables, Florida 33143

**ARTICLE III  
Registered Agent, Registered Office & Registered Agent's Signature**

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

Bruce Lamchick  
9130 S. Dadeland Blvd., Suite 1101  
Miami, Florida 33156

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..

  
\_\_\_\_\_  
Bruce Lamchick

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**ARTICLE IV**

**Units**

The number of units initial authorized is 1,000,000.00 units at \$.001 par value.

**ARTICLE V**

**Member/Manager**

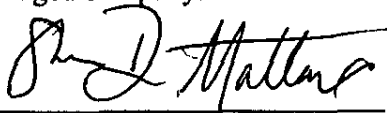
Listed below is the initial member/manager of the limited Liability Company:

**Shane Mattaway**

**ARTICLE VI**

**Management (Check box if applicable)**

- ☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company.



Signature of a member

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalty of perjury that the facts stated herein are true

Shane Mattaway

Typed or printed name of signee