(Re	questor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	•	
		·
Con		

Office Use Only



700118519567

02/27/08--01021--016 \*\*155.00

G. MCLEOD

FEB 2 8 2008

**EXAMINER** 

## **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations	,
SUBJECT: JOU'S Infan	+ Swimming, L.L.C. Florida Limited Company)
The enclosed Certificate of Conversion, Ar convert an "Other Business Entity" into a "accordance with s. 608.439, F.S.	ticles of Organization, and fees are submitted to Florida Limited Liability Company" in
Please return all correspondence concerning	g this matter to:
Joy Albritton (Contact Person) Infant Swimming Reso (Firm/Company)  6280 Lake Plantation (Address)  Jacksonville, FL 322 (City, State and Zip Code)	
For further information concerning this mat	tter, please call:
Joy Albritton (Name of Contact Person)	at ( 904 ) 317-7111 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\square{1}\$\$ \$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy 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

# <u>Certificate of Conversion</u>

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: Cart Swimming Corporation  (Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a <u>Corporation</u> (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)	08 FEB	SECRE DIVISION
first organized, formed or incorporated under the laws of Florida	82	STATE
(Enter state, or if a non-U.S. entity, the name of the country)	1	- 8 <sup>22</sup> E
on $\frac{10/29/07}{\text{(Enter date "Other Business Entity" was first organized, formed or incorporated)}}$	PM 3: 24	PEPCRAI
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:	<u>}</u> .	<u>S</u> m
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  JOYS Infant Swimming, L.L.C.  (Enter Name of Florida Limited Diability Company)		

(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 21st day of February 2008.
Signature of Authorized Person: Jalbritton
Printed Name: Joy Albritton Title: Registered Agent
Fees:

Page 2 of 2

\$25.00

\$125.00

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

Certificate of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Joy's Infant Swimmir	
(Must end with the words "Limited Liability Company," the abb "LLC.")	heviation "L.L.C.," or the designation
ARTICLE II - Address:	
The mailing address and street address of the pri Liability Company is:	incipal office of the Limited
Principal Office Address:	Mailing Address:
6280 Lake Plantation Drive Jacksonville, FL 32244	Same
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Registerindividual or another business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Joy Albritta	n
6280 Lake Plane	
Florida street address (P.O.	Box NOT acceptable)
Jacksonville, City, State	FL 32244
City, State	, and zip
Having been named as registered agent and to above stated limited liability company at the planeterby accept the appointment as registered capacity. I further agree to comply with the protect the proper and complete performance of my disaccept the obligations of my position as regis	nce designated in this certificate, I I agent and agree to act in this ovisions of all statutes relating to uties, and I am familiar with and
Chapter 608, F.	
Registered Agent's Sig	gnature (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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
*MGR	Lawrence Albritton Coaso Lake Plantation Dr. Jax, Fl 32244	
<del> </del>		
<del></del>		
***************************************	(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the doptional) If an effective date is listed, the date must be outliness days prior to or 90 days after the date	e specific and cannot be more than five	
REQUIRED SIGNATURE:  Signature of a member or an auth	norized 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 printe	ed name of signee	

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)