L08000035338

(Re	equestor's Name)	.
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	•	

Office Use Only



800122284358

04/07/08--01027--022 ++150.00

2008 APR -7 PH 4: 33
SECRETARY OF STATE
ALL AHASSEE. FLORID

T. CLINE

APR - 9 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Maine Event Productions (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:
Todd Maine
Todd Maine (Contact Person) The Maine Event Productions (Firm/Company) 2420 Wilton Drive (Address) Wilton Manors, FL 33305 (City, State and Zip Code)
(Firm/Company)
2920 Wilton Drive
Wilton Manors, FL 33305
(City, State and Zip Code)
SSE SSE
For further information concerning this matter, please call:
Wilton Manors, FL 33305 (City, State and Zip Code) For further information concerning this matter, please call: Todd Maine (Name of Contact Person) (Area Code and Daytime Telephone Number) 33
,
Enclosed is a check for the following amount:
\$150.00 Filing Fees \$155.00 Filing Fees \$180.00 Filing Fees \$185.00 Filing Fees, (\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and Status of Organization)
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
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: The Maine Event Productions, Inc. (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Shapker S Corporation. (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
(Enter state, or if a non-U.S. entity, the name of the country) on 10/31/2002 (Enter date "Other Business Entity" was first organized, formed or incorporated under the laws of which it is now 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:
The Maine Event Productions, LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)

he
_

Fees:

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

\$30.00 (Optional)

Certified Copy: Certificate of Status:

\$5.00 (Optional)

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

ARTICLE I - Name:

ARTICLE II - Address:

"LLC.")

The name of the Limited Liability Company is:

Principal Office Ad	dress:	Mailing Address:	
2420 wilton Wilton Mane	Drive Drs, FL 33305	SAME	
Signature: (The Limited Liability Comindividual or another business entity with an act	pany cannot serve as its own R ive Florida registration.) orida street address of t	ered Office, & Registered Agent. You must designate the registered agent are:	2008 APR -7 SECRETARY
	Gonzalo Per 516 Sw 6 Au Florida street address (P	ame P.O. Box <u>NOT</u> acceptable)	PM 4: 33 OF STATE E.FLORIDA

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

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member NGR (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.) Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

\$125.00 Filing Fee for Articles of Organization and Designation