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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

APR 2 9 2008

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	erendipi N (Name of Resulting	Production?	SILLC	
	(Name of Resulting	Florida Limited Company)	
	usiness Entity" into a '		and fees are submitted to ity Company" in	
Please return all cor	respondence concernin	g this matter to:		
Rochelle	Gross			
Severdipi	(Contact Person) (Contact Person) (Firm/Company)	s Lic		
1602 E	(Address)			
	(Address)			
Tompa	FL 33605 (City, State and Zip Code)			
	(City, State and Zip Code)			
For further informat	ion concerning this ma	tter, please call:		
Robbelle 6	rosc	at (813) 24	1.9213	
(Name of Cont	act Person)	(Area Code and Da	ytime Telephone Number)	
Enclosed is a check	for the following amou	ent:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	2\$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		

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: Sevendipity Productions, Limited. Parternething (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a home partnership, sole proprietorship, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of
onO/
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:
Alu
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Serendipity Productions, LLC
(Enter Name of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor m document is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days after the date this State; <u>AND</u> 2) must be the same as th
Signed this 22-d day of April	2008
Signature of Authorized Person: Courselle	698
Printed Name: Rochelle Gross Title	President
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	ICI	ÆI	_ 1	Vя	me:

The name of the Limited Liability Company is:

(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:

Mailing Address:

1602 E 3rd Ave. Tampa, AL 33605 Tompa FL 33605

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

business entity with an active Florida registration.)

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

Rochelle Gross

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

Tamm 33105

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

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MoR (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (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 Certificate of Conversion, if an effective date is listed therein.) 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.

Rochelle Gross
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)