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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
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Certified Copies Certificates of Status
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SECRETARY OF STATE
TALLAHASSFF, FI DRIDA

A. LUNT

MAY - 1 2008

EXAMINER

COVER LETTER

TO: Registration Section

Tallahassee, FL 32301

Division of Corporations				
SUBJECT: DREAMERS OF NORTHEAST FLORIDA, LLC (Name of Resulting Florida Limited Company)				
The enclosed Certificate of Conversion, And convert an "Other Business Entity" into a 'accordance with s. 608.439, F.S.	rticles of Organ	nization	, and fees are submitted to	
Please return all correspondence concerning	g this matter to):		
RICHARD DIAL	· · · · · · · · · · · · · · · · · · ·		2000 SEI TALI	
(Contact Person) DIAL ACCOUNTING SERVICE (Firm/Company)			1000 APR 30 P 2: 5: SECRETARY OF STATE ALLAHASSEE, FLORIC	•
144 ARLINGTON RD S, SUITE 2 (Address)		_	Y OF ST	
JACKSONVILLE, FL 32216	·		: 53 ATE DRIDA	
(City, State and Zip Code) For further information concerning this ma	tter, please call	l :		
RICHARD DIAL	_at (_904		5-4504	
(Name of Contact Person) Enclosed is a check for the following amounts of the following amount of the following amounts of the following amount of the following amounts of the following amounts of the following amount of the following amounts of the following amounts of	•	de and D	aytime Telephone Number)	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\square{7}\$155.00 Filing Fees and Certificate of Status	\$180.00 Filin and Certified Co		\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	Regis Divisi P. O.	tration ion of 0 Box 63	ADDRESS: Section Corporations 27 FL 32314	

FILED

Certificate of Conversion For "Other Business Entity" Into Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> 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 the	his	
Certificate of Conversion is: DREAMERS OF NORTHEAST FLORIDA, INC		
(Enter Name of Other Business Entity)		-
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, sole propageneral partnership, common law or business trust, etc.)	rietorsh	 nip, 智慧
first organized, formed or incorporated under the laws of FLORIDA	ARCRE	R APA
(Enter state, or if a non-U.S. entity, the name of the country) JULY 21, 2004	TARY OF ASSEE, F	30
(Enter date "Other Business Entity" was first organized, formed or income. 3. If the jurisdiction of the "Other Business Entity" was changed, the state or counder the laws of which it is now organized, formed or incorporated:	~~	d) 5.3
N/A		_ .
4. The name of the Florida Limited Liability Company as set forth in the attack Articles of Organization:	hed	
DREAMERS OF NORTHEAST FLORIDA, LLC		
(Enter Name of Florida Limited Liability Company)		_

Page 1 of 2

5. If not effective on the date of filing, enter the e (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 Clisted therein.)	nore than 90 days afte State; <u>AND</u> 2) must l	be the same as t	he
Signed this day of day of	20 08		
Signature of Authorized Person:	My 2		
Printed Name: MANUEL AFFLEJE Title	MGR MGR		_
Fees:	,	1008 APR 30 P 2: 53 SECRETARY OF STATE TALLAHASSEE. FLORIDI	FILED
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy:	\$25.00 \$125.00 \$30.00 (Optional)	Σ [™] . ω	
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:

DREAMERS OF NORTHEAST FLORIDA, LLC

(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:

Principal Office	Address:	Mailing Ac	ddress:		, ,
1520 FRANKLIN STE	REET	1520 FRANKLI	N STREET		
FERNANDINA BEAC	H, FL 32034	FERNANDINA	BEACH, FI	L 32034	-
Signature: (The Limited Liability individual or another business entity with an	Registered Agent, Register Company cannot serve as its own Regin active Florida registration.) Florida street address of the	gistered Agent. You r	TASE CRETA	, Zing apa	
The name and the	GARY MARLOW	e registered agei	A SEC. FI	30 P	Ш
	3744 CAYMAN ČÎ	₹CLE	STATE	_	O
	Florida street address (P.	O. Box NOT ac		-w	
	FERNANDINA BEACH, FL 3203	<u> ۲۱ ک</u>	034	-	
	City, St	ate, and Zip	1		

.....

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: "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	GARY MARLOW 1520 FRANKLIN STREET FERNANDINA BEACH, FL 32034		
MGR	DAVE MCCONNELL 1520 FRANKLIN STREET FERNANDINA BEACH, FL 32034		
MGR	LARRY BROWN 85594 KIRKLAND ROAD		
SEE ATTACHED SCHEDULE A	YULEE, FL 32097 LEC SE APR APR SSET O T		
(Use attachment if necessary)	D 2: 5: STATE FLORID		
ARTICLE V: Effective date, if other than the date of filing: APRIL 24, 2008 (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.)

MANUEL AFLLEJE

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)

DREAMERS OF NORTHEAST FLORIDA, LLC

SCHEDULE A

MGR GARRY WATSON

1520 FRANKLIN STREET

FERNANDINA BEACH, FL 32034

MGR DANIEL VEREEN

11111 COPPERHILL DRIVE

JACKSONVILLE, FL 32218

MGR MANUEL AFLLEJE

2072 CHAZZ PLACE

YULEE, FL 32097

PILED

2000 APR 30 P 2: 5

SECRETARY OF STATE