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(R	equestor's Name)
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(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(В	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status

Special Instructions to Filing Officer:

L. SELLERS

MAY - 1 2008

EXAMINER

Office Use Only



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SECRETARY OF STATE TALLAHASSEE FI SOIL

## **COVER LETTER**

13

TO: Registration Section Division of Corporations			
SUBJECT: Virtua Sanibe L.L.C.  (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:			
Stephanie Strange Virtual Sanihel Inc.			
Virtual Sanibe Inc. (Firm/Company)			
5892 Sanibel Captiva Rd.			
Sanibel Florida 33957 (City, State and Zip Code)			
For further information concerning this matter, please call:			
Stephanie Strange at (239) 395-1927 (Name of Contact Person) (Area Code and Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$\bigsquare{1}\$\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\bigsquare{1}\$\$155.00 Filing Fees and 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 <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 Busine	ess Entity" immediately	y prior to the filing	g of this
Certificate of Conversion is:	Virtual	Sanibel,	Inc.
(Enter l	Name of Other Busine	ess Entity)	
2. The "Other Business Entity" is	sa <u>S-Corpor</u>	ation	
	hip, common law or b	usiness trust, etc	.)
first organized, formed or incorpo	orated under the laws of	f Florid	a
(Enter state, or if a	non-U.S. entity, the r	name of the count	ry)
on 8/25/03			
(Enter date "Other Business	Entity" was first orga	nized, formed or	incorporated)
3. If the jurisdiction of the "Othe under the laws of which it is now N/H	•	_	or country
4. The name of the Florida Limit Articles of Organization:			
Virtua	al Sanibe	1, L.L.	<i>C.</i>
(Enter Name of Florida Limited Liability Company)			

908 APR 30 PM 1: 0:

5. If not effective on the date of filing, enter the effective date:  (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 23 day of APRIL 20 08.
Signature of Authorized Person:
Printed Name: Stephanie Strangeritle: Manager

# Fees:

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

Certificate of Status:

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
Principal Office Address: Mailing Address:					
5892 Sanibel Captiva Rd Sanibel, FL: 33957 Sanibel, FL: 33957	Rd				
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:					
_ William Strange					
William Strange  Name  5892 Sanibel - Captiva Rd  Florida street address (P.O. Box NOT acceptable)					
· · · · · · · · · · · · · · · · · · ·					
Sanibel FL 33957					
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.					
mn A ARE AR	•				
Registered Agent's Signature (REQUIRED)	9				
(CONTINUED)	İT				
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	Stephanie Strange 5892 Sanibel-Captiva Rd Sanibel FL 33957
MGR	William Strange 5892 Sanivel Captiva Rd Sanivel FL 33957
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the date (The effective date: 1) cannot be prior to not document is filed by the Florida Department the effective date listed in the attached Cerdate is listed therein.)	(OPTIONAL)  more than 90 days after the date this of State; <u>AND</u> 2) must be the same as
REQUIRED SIGNATURE:	
P. Stran	
Signature of a member or an auth	orized representative of a member.
of this document constitutes an affir that the facts state	8(3), Florida Statutes, the execution mation under the penalties of perjury d herein are true.)
<u>Stephanie</u> Typed or printed	Strange
Typed or printed	d name of signee
Filing Fees:	d name of signee
\$125.00 Filing Fee for Articles of C of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Opti	e, FL