L08000058814

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
1			

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08/04/08--01020--003 ++155.00

COVER LETTER

TO: Registration 9 Division of C				
SUBJECT: FAVOR ENTERPRISES LLC (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:				
LARRY L. GARRETT (Contact Person)				
FAVOR ENTERPRISES LLC (Firm/Company)				
5469BRISTOLBAYLN.N.				
TACK 30 NVILL, Flouda 32244 (City, State and Zip Code)				
For further information concerning this matter, please call:				
LARRY GAR (Name of Conta		at (904) 51 (Area Code and Da	73-6307 Lytime Telephone Number)	
Enclosed is a check for the following amount:				
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$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 Corporate Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions er Circle	MAILING A Registration S Division of C P. O. Box 63: Tallahassee, I	Section Corporations 27	



June 5, 2008

LARRY L. GARRETT 5469 BRISTOL BAY LANE N JACKSONVILLE, FL 32244

SUBJECT: FAVOR ENTERPRISES LLC

Ref. Number: W08000027561

We have received your document for FAVOR ENTERPRISES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 608A00035040

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	pany is:	
I AM FAVORE (Must end with the words "Limited Liability Compare" LLC.")	ny," the abbreviation "L.L.C.," or the designation	-
ARTICLE II - Address: The mailing address and street address of Liability Company is:	of the principal office of the Limited	
Principal Office Address:	Mailing Address:	
5469 BRISTOL BAYLN JACKSONVIlle, FLORID 32244	.N.	- -
ARTICLE III - Registered Agent, Resignature: (The Limited Liability Company cannot serve as its condividual or another business entity with an active Florida registration.)	- · · · · · · · · · · · · · · · · · · ·	
The name and the Florida street address	of the registered agent are:	
5469BR131	Name O Pay iane North ss (P.O. Box NOT acceptable)	SECRETARY OF STATE
JACKSONVILL	e FL 32244	

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)

City, State, and Zip

(CONTINUED)

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:
MGR	LARRY L. GARRETT 5469 BRISTOL BAY IN.N. Jacksonville FL. 32244
MGRM	NICOA R. GARRETT 5469 BRISTOL BAY LN.N. Jacksonville, T. 32244
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the (The effective date: 1) cannot be prior to no document is filed by the Florida Department the effective date listed in the attached Codate is listed therein.) REQUIRED SIGNATURE: Signature of a member or an auti	or more than 90 days after the date this at of State; AND 2) must be the same as ertificate of Conversion, if an effective
(In accordance with section 608.4) of this document constitutes an affi	08(3), Florida Statutes, the execution rmation under the penalties of perjury ted herein are true.)
LARRY L. Cor Typed or printe	PRRCTT ed name of signee
Elling Loos	

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)