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(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:

Polo-2303

A. LUNT

FEB 1 2 2009

EXAMINER

Office Use Only



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COVER LETTER

	tration S ion of C	Section orporations				
SUBJECT:		Quarta	Bribble Lice			
0020201		(Name of Resulting	Florida Limited Company)		
	Other Bu	siness Entity" into a '	rticles of Organization, 'Florida Limited Liabil			
Please return	all corre	espondence concernin	g this matter to:			
Brya	N A	Robinson	,			
Du	ertee /	(Contact Person) Malble, Jac. (Firm/Company)	· · · · · · · · · · · · · · · · · · ·		200	
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Brade	nton	FC 34203 City, State and Zip Code)				3
	. ((City, State and Zip Code)	•		55 5	6
For further in	formatio	on concerning this ma	tter, please call:		PH 12: 20	
Brund	. A.	Poberaon,	at (941) \$1 (Area Code and Da	2-0174	:	
(Name	of Conta	ct Person)	(Area Code and Da	ytime Telephone N	umber)	
Enclosed is a	check f	or the following amou	int:			
\$150.00 Filin (\$25 for Conver & \$125 for Artic of Organization)	sion cles	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	\$185.00 Filing Certified Copy, ar Certificate of State	nd	
STREET AD Registration S Division of C Clifton Buildi 2661 Executiv	Section orporatiing	ons	MAILING A Registration S Division of C P. O. Box 632 Tallahassee, 1	Section orporations 27		

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.

Certificate of Conversion is: Quarter Bubble Une.	
(Enter Name of Other Business Entity)	,
2. The "Other Business Entity" is a <u>COLOGOTON</u> (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)	; -
first organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)	2 0 1 2
on Jan. Le, 2000 (Enter date "Other Business Entity" was first 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:	
Quarter Bubble LLC.	
(Enter Name of Florida Limited Liability Company)	
5. If not effective on the date of filing, enter the effective date: 1/1/09 (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.)	

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Signed this 7th day of 4th.	20 <u>9</u> .	
Signature of Member or Authorized Representat	tive of Limited Liability Company:	
Signature of Member or Authorized Representative: Printed Name: Dryck A Rapiusor	:	
Signature(s) on behalf of Other Business Entity: [S	See below for required signature(s).]	
Signature:		
Signature:Printed Name:	_ Title:	
Signature:		
Signature:Printed Name:		
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title	
	*	
Signature:	Pr.	200
Signature: Printed Name:	_Title:	2009 FEB
Signature:	70 mg	
Printed Name:	Title:	- I
Signature: Printed Name: If Florida Corporation; Signature of Chairman, Vice Chairman, Director, or Olf Directors or Officers have not been selected, an Incompared to the Chairman of Chairman, Director, or Olf Directors or Officers have not been selected.	Officer. Spirit Corporator must sign.	PH 12: 20
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		

Page 2 of 2

\$25.00

\$125.00

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

Certificate of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Compar"LLC.") ARTICLE II - Address: The mailing address and street address of Liability Company is:		
Principal Office Address:	Mailing Address:	
5311 5th St. Ct & Bradenton FL 34203	5311 Stl- St UE Bradenton FL	
ARTICLE III - Registered Agent, Registere: (The Limited Liability Company cannot serve as its of individual or another business entity with an active Florida registration.)	gistered Office, & Registered Agent's a pown Registered Agent. You must designate an School Color Colo	
The name and the Florida street address	of the registered agent are: Registered agent	
\sim	K RODINAMI SS D	
Bryan	A COUNTRY DE N	المبيئة
<u>Bryan</u> 5311 5 th 8	Name 27. U.F. E	
	Name St. Ut E ss (P.O. Box <u>NOT</u> acceptable)	
Florida street addres	84. CF E	

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:

MGR" = Manager	Name and Address:
MGRM" = Managing Member	70
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	(Use attachment if necessary)
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

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