Lb9000049550

(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					
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(461					

Office Use Only

W9-21114



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M. THOMAS

MAY 21 2009

EXAMPLE FOR

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: GULF MARINE WAYS, 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:

LINDA MAILISAND					
(Contact Person)				,,,,,,,	
GULF MARINE WAYS	, INC.		_		
(Firm/Company)			_	_ -	200
950 DODECANESE B	LVÐ.				シャン
	(Address)				ורו. בח:
TARPON SPRINGS, F	FL 34689				
(1	City, State and Zip Code)				
For further informati	on concerning this ma	tter, p	lease cal	II:	
LINDA MAILISAND		at (727) 934-	3860
(Name of Conta	act Person)	 \-	(Area Co	ode and Da	aytime Telephone Number)
Enclosed is a check t	for the following amou	ınt:			
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		80.00 Fili Certified C	_	□\$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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2009

LINDA MAILISAND 950 DODECANESE BLVD. TARPON SPRINGS, FL 34689

SUBJECT: GULF MARINE WAYS LLC

Ref. Number: W09000021114

We have received your document for GULF MARINE WAYS LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed; and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 709A00015121

<u>Certificate of Conversion</u> 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 this			
Certificate of Conversion is: $6000000000000000000000000000000000000$			
(Enter Name of Other Business Entity)	57 (F)		
2. The "Other Business Entity" is a CORPORATION			
(Enter entity type. Example: corporation, limited partnership, sole propriet general partnership, common law or business trust, etc.)	ر,orship المراكزة		
first organized, formed or incorporated under the laws of FLORIDA	-17. -17.		
(Enter state, or if a non-U.S. entity, the name of the country)			
on 08/01/1981 (Enter date "Other Business Entity" was first organized, formed or incorpo	rated)		
3. If the jurisdiction of the "Other Business Entity" was changed, the state or count under the laws of which it is now organized, formed or incorporated:	iry		
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:			
GULF MARINE WAYS, LLC			
(Enter Name of Florida Limited Liability Company)			
5. If not effective on the date of filing, enter the effective date:			
document is filed by the Florida Department of State; <u>AND</u> 2) must be the same effective date listed in the attached Articles of Organization, if an effective date listed therein.			

Signed this APRIL day of 25	20 09
Signature of Member or Authorized Representa	tive of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: LINDA MAILISAND	: Linda Mailisand Title: PRESIDENT/TRUSTED MGRM
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).
Signature: LINDA MAILISAND	Title: PD TRUSTEE
Signature:	덩
Printed Name:	_ Title:
Signature:	- F. (20)
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
Printed Name:	_ Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of If Directors or Officers have not been selected, an Inc.	corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	ry Partnersnip:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
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

ARTICLE I - Name:

The name of the Limited Liability Company is:

GULF MARINE WAYS, 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 Address:

950 DODECANESE BLVD.

TARPON SPRINGS, FL 34689

950 DODECANESE BLVD.
TARPON SPRINGS, FL 34689

ARTICLE III - Registered Agent, Registered Office, & Registered Agentis

(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:

LINDA MAILISAND

Name

500 HARMONY LANE

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

TARPON SPRINGS

FL 34689

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: "MGR" = Manager "MGRM" = Maragina Marahan	Name and Address:
"MGRM" = Managing Member MGRM TRUSTEE	Linda Mariisand 500 HARMONY LANE TARPON SPRINGS, FL 34689
	(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) r more than 90 days after the date this of State; AND 2) must be the same as
REQUIRED SIGNATURE: Signature of a member or an author	orized representative of a member.
of this document constitutes an affir	8(3), Florida Statutes, the execution mation under the penalties of perjury d herein are true.)
LINDA MAILISAND Typed or printed	d 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)

Page 2 of 2