# L09000051243

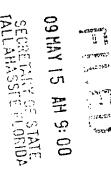
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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TO:	Registration			
	Division of C			
SUBJE	ECT:GUN	MBY'S PIZZA OF E	ist Lans	ing, LLC
		(Name of Resulting	Florida Limited Compa	any) O
convert accorda	t an "Other Bance with s. 6	usiness Entity" into a '08.439, F.S.	Florida Limited Lia	on, and fees are submitted ability Company" in
Please	return all com	respondence concernin	g this matter to:	
Cl-	IANCE HIPPLE	-R		
		(Contact Person)		
GL	JMBY'S PIZZA	· · · · · · · · · · · · · · · · · · ·		
		(Firm/Company)	<del>,</del>	
39	11 W NEWBEI	RRY RD C-1		
		(Address)		
G/	AINESVILLE, F	L 32607		
<u> </u>	(	City, State and Zip Code)		
	ther informati	on concerning this ma	_at (352)_2	219-0692
	(Name of Conta	act Person)	(Area Code and	Daytime Telephone Number)
Enclose	ed is a check f	for the following amou	nt;	
\$25 for	00 Filing Fees Conversion or Articles ization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fee and Certified Copy	S \$185.00 Filing Fees, Certified Copy, and Certificate of Status
eren er	T ADDDEC	<b>a</b> .	NA A TY INI	C ADDDECC.

#### **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



May 18, 2009

CHANCE HIPPLER 3911 W. NEWBERRY RD C-1 GAINESVILLE, FL 32607

SUBJECT: GUMBY'S PIZZA OF EAST LANSING, LLC

Ref. Number: W09000023322

We have received your document for GUMBY'S PIZZA OF EAST LANSING, 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):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

ARTICLE IV designate if they are Managers or Managing Members.

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 Regulatory Specialist II

Letter Number: 509A00016826

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**Certificate of Conversion** 

For

09 MAY 15 AM 9: 00

"Other Business Entity"

Into

SECRETARY OF STATE TALLAHASSEE FLORIDA

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.

1. The name of the "Other Business Entity" immediately prior to the filing of this						
Certificate of Conversion is M: ch: 39n State Inc L41202  (Enter Name of Other Business Entity)						
(Enter Name of Other Business Entity)						
2. The "Other Business Entity" is a CORPORATION						
(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 ofFLORIDA						
(Enter state, or if a non-U.S. entity, the name of the country)						
on 3.4.92						
(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:						
GUMBY'S PIZZA OF EST LSASIAS, LLC  (Enter Name of Florida Limited Liability Company)						
(Enter Name of Florida Limited Liability Company)						
5. If not effective on the date of filing, enter the effective date: MAY 20, 2009						
(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; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)						

Edited by Foxit Reader Copyright(C) by Foxit Software Company, 2005-2006 For Évaluation Only. Signed this 12 MAY day of Signature of Member or Authorized Representative of Limited Liability Company: Signature of Member or Authorized Representative: Printed Name: CHANCE HIPPLER Title: Signature(s) on behalf of Other Business Entity: [See below for required signature(s).] Signature: JEFF O'BRIEN Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Title: Printed Name:\_\_\_ Signature: Printed Name:\_\_\_ Title: \_ Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Certificate of Conversion: \$25.00 Fees for Florida Articles of Organization:

Certified Copy:

Certificate of Status:

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
GUMBY'S PIZZA OF ESSTLEM LLC					
(Must end with the words "Limited Liability "LLC.")			n "L.L.C.," or the designation		
ARTICLE II - Address: The mailing address and street add Liability Company is:	dress of the prin	cipal	office of the Limited		
Principal Office Address:		Mail	ling Address:		
3911 W NEWBERY RD C-1 GAINESVILLE, FL 32607			11 W NEWBERRY RD C-1 GAINESVILLE , FL 32607		
ARTICLE III - Registered Agen Signature: (The Limited Liability Company cannot serve individual or another business entity with an active Florida registr	as its own Registere				
The name and the Florida street address of the registered agent are:					
CHANCE I	HIPPLER				
Name 3850 NW 16TH PLACE					
Florida street address (P.O. Box NOT acceptable)					
GAINESVIL	LE ]	FL	32607		
	City, State, a	and Z	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

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### For Evaluation Only. ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member			
CHANCE HIPPLER	3850 NW 16TH PLACE		
	GAINESVILLE, FL 32605		
JEFF O'BRIEN	8720 SW 40TH DRIVE		
<del></del>	GAINESVILLE, FL 32608		
FRANK MYLES	3850 NW 16TH PLACE		
<del></del>	GAINESVILLE, FL 32605		
	(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the			
(The effective date: 1) cannot be prior to a document is filed by the Florida Department the effective date listed in the attached C date is listed therein.)	ent of State; AND 2) must be the same as		
REQUIRED SIGNATURE:			
/2	O9 H		
Signature of a member or an au	thorized representative of a member.		
of this document constitutes an af	408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.)		
CHANCE HIPPLER	OR ID		
Typed or prin	ited 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)