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(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(City/State/21p/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Cosamon Hambon)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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SEGRETARY OF STATE NY ISION OF CORPORATIONS

109 SEP 23 AM ID: 17

T. HAMPTON

EXAMINER

COVER LETTER

Division of C			
SUBJECT: Simpl	icity Student Trav		<u>+</u>
	(Name of Resulting	Florida Limited Company	<i>'</i>)
	isiness Entity" into a '	rticles of Organization 'Florida Limited Liabi	, and fees are submitted to dity Company" in
Please return all corr	espondence concernin	g this matter to:	
Lori Sambor		·	
	(Contact Person)		
Simplicity Student Trav			
	(Firm/Company)		
501 East Washington A	Avenue		
	(Address)		
Eustis, Florida 32726			
	City, State and Zip Code)	······································	
		•	
For further informati	on concerning this ma	tter, please call:	
Lori Sambor		_at (_407) 749	-0066
(Name of Conta	ct Person)	(Area Code and D	Paytime Telephone Number)
Enclosed is a check f	for the following amou	int:	
\$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	S:	MAILING.	
Registration Section Division of Corporati	ions	Registration Division of 0	
Clifton Building	IOHS	P. O. Box 63	
2661 Executive Cent	er Circle	Tallahassee,	
Tallahassee, FL 3230	01		

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.

Simplicity Student Travel, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>corporation</u> .
(Enter entity type. Example: corporation, limited partnership,
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)
on August 26, 2009 .
(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:
Simplicity Student Travel L.L.C.
(Enter Name of Florida Limited Liability Company)
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

Page 1 of 2

listed therein.)

Signed this Z S day of SQ16	MOl2009.
Signature of Member or Authorized Re	presentative of Limited Liability Company:
Signature of Member or Authorized Repre	esentative: Are Double
Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]
Signature:	
Signature: Clipson Shapes	Title: Manager/ Owner
Signature:	
Printed Name:	Title:
6:	
Signature:	Title:
I timed Name.	Title.
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	rev.t.
Printed Name:	I itle:
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected.	
If Directors of Officers have not been selected	ed, an incorporator must sign.
If Florida General Partnership or Limited Signature of one General Partner.	d Liability Partnership:
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	I Liability Limited Partnership:

All others: Signature of an authorized person.

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:
Simplicity Student Travel, L.L.C (Must end with the words "Limited Liability Company," the "LLC.")	e abbreviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of th Liability Company is:	e principal office of the Limited
Principal Office Address:	Mailing Address:
501 East Washington Avenue Eustis, Florida 32726	501 East Washington Avenue Eustis, Florida 32726
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Rindividual or another business entity with an active Florida registration.) The name and the Florida street address of the server and the server address of the server and the server	egistered Agent. You must designate an
Lori Sambor	
	ame
	P.O. Box NOT acceptable)
Eustis,	FL 32726

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 60}, F.S.

Registered Agent's Signature (REQUIRED)

City, State, and Zip

(CONTINUED) Page 1 of 2 SEGRETARY OF STATE
JIVISION OF CORPORATION

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ARTICLE IV- Manager(s) or Managing Member(s):

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

"MGR" = Manager	
"MGRM" = Managing Member	
www.ug.ng w.w.uo.	
Managing Member	Lori Sambor /MGRM
	501 East Washington Avenue
	Eustis, Florida 32726
	4
	
	
	(Use attachment if necessary)
IF Vs. Effective data if other than	`
LEV: Effective date, if other than	the date of filing: (OPTIONAL)
fective date: 1) cannot be prior tent is filed by the Florida Depart	the date of filing:
fective date: 1) cannot be prior tent is filed by the Florida Departective date listed in the attached listed therein.)	the date of filing: (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as
fective date: 1) cannot be prior tent is filed by the Florida Depart ective date listed in the attached	the date of filing: (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as
fective date: 1) cannot be prior tent is filed by the Florida Departective date listed in the attached listed therein.) REQUIRED SIGNATURE:	the date of filing: (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as
fective date: 1) cannot be prior to the state of the florida Department of the date listed in the attached disted therein.) REQUIRED SIGNATURE: Signature of a member or an (In accordance with section 60)	the date of filing: (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as a Certificate of Conversion, if an effective authorized representative of a member. (08.408(3), Florida Statutes, the execution
fective date: 1) cannot be prior to the introduction of the florida Department of the data listed in the attached isted therein.) REQUIRED SIGNATURE: Signature of a member or an (In accordance with section 60 of this document constitutes and section for the floridation of the	the date of filing: (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as a Certificate of Conversion, if an effective authorized representative of a member.
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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

