

L10000039571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

APR 13 2010

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Excursions Plus, 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:

Jim Valenti  
(Contact Person)  
Valenti Campbell Trohn Tamayo & Aranda, P.A.  
(Firm/Company)  
P.O. Box 2369  
(Address)  
Lakeland, FL 33806  
(City, State and Zip Code)  
j.valenti@vcttalawyers.com  
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Jim Valenti at ( 863 ) 686-0043  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	<input type="checkbox"/> \$155.00 Filing Fees and Certificate of Status	<input type="checkbox"/> \$180.00 Filing Fees and Certified Copy	<input type="checkbox"/> \$185.00 Filing Fees, Certified Copy, and Certificate of Status
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**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

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**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.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:  
Excursions Plus, Inc. 009-6863

**(Enter Name of Other Business Entity)**

2. The "Other Business Entity" is a Corporation  
**(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 01/22/2009

**(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**:

Excursions Plus, LLC

**(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 listed therein.)**

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Signed this 9th day of April 2010.

**Signature of Member or Authorized Representative of Limited Liability Company:**

Signature of Member or Authorized Representative:   
Printed Name: Jim Valenti Title: Manager

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]**

Signature:   
Printed Name: Jim Valenti Title: President

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

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**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:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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

**ARTICLE I:**

The name of the Limited Liability Company is:

EXCURSIONS PLUS, LLC

**ARTICLE II:**

The mailing address and the street address of the principal office of the Limited Liability Company is:

Street Address:

1701 S. FLORIDA AVE  
LAKELAND, FL 33803

Mailing Address:

P.O. BOX 2369  
LAKELAND, FL 33803

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**ARTICLE III:**

The name and Florida street address of the registered agent are:

JAMES C. VALENTI  
1701 S. FLORIDA AVE  
LAKELAND, FL 33803

*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)

**ARTICLE IV:**

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

**Title:**

MGR

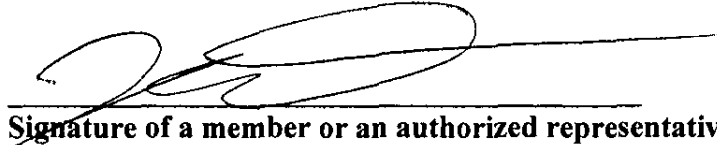
**Name and Address:**

James Valenti  
1701 S Florida Avenue  
Lakeland, FL 33803

**ARTICLE V:**

Effective date is the date of filing.

**REQUIRED SIGNATURE:**

A handwritten signature in black ink, appearing to read 'James C. Vaenti', is written over a horizontal line.

**Signature of a member or an authorized representative of a member.**

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee:  
JAMES C. VAENTI

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