# L10000056105

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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T. HAMPTON
MAY 2 5 2010
EXAMINER

#### **COVER LETTER**

TO: Registration Section **Division of Corporations** SUBJECT: PSYCHICPOWER.COM, 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: SEAN L. WILSON (Contact Person) LAW OFFICE OF SEAN L. WILSON (Firm/Company) 2385 N.W. EXECUTIVE CENTER DRIVE, SUITE 100 (Address) **BOCA RATON, FLORIDA 33431** (City, State and Zip Code) sean@seanlwilson.com E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: SEAN L. WILSON at ( <sup>954</sup> 575-3360 (Name of Contact Person) (Area Code and Daytime Telephone Number) Enclosed is a check for the following amount: ■ \$150.00 Filing Fees **☑**\$155.00 Filing Fees □\$180.00 Filing Fees **□\$185.00** Filing Fees, (\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and & \$125 for Articles Status Certificate of Status of Organization) STREET ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

**Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

## 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.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: PSYCHICPOWER.COM, INC.	<i>.</i>
(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.)	<u></u> .
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 MARCH 17, 2008	
(Enter date "Other Business Entity" was first organized, formed or incorporate	ed)
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:	
N/A	<u> </u>
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
PSYCHICPOWER.COM, 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 th document is filed by the Florida Department of State; AND 2) must be the same a effective date listed in the attached Articles of Organization, if an effective date is	is the

listed therein.)

Signed this 11 day of MAY	20_10
Signature of Member or Authorized Repr	esentative of Limited Liability Company:
Signature of Member or Authorized Represe Printed Name: DAVID FELGER	entative: Title: MANAGER
Signature(s) on behalf of Other Business Er	See below for required signature(s).]
Signature:	
Signature: Printed Name: DAVID FELGER	Title: DIRECTOR
Signature:	
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Direct	
If Directors or Officers have not been selected,	, an Incorporator must sign.
If Florida General Partnership or Limited 1	iability Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited L Signatures of <u>ALL</u> General Partners.	iability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Certificate of Conversion:	\$25.00

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\$125.00

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

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:

#### PSYCHICPOWER.COM, 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:** 

381 MOORINGS DRIVE

LANTANA, FLORIDA 33462

381 MOORINGS DRIVE

LANTANA, FLORIDA 33462

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

SEAN L. WILSON

Name

2385 N.W. EXECUTIVE CENTER, DRIVE, SUITE 100

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

**BOCA RATON** 

FL 33431

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

JIVISION OF CORPORATION

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	DAVID FELGER
	381 MOORINGS DRIVE
	LANTANA, FLORIDA 33462
MGR	DANIEL FELGER
	381 MOORINGS DRIVE
	LANTANA, FLORIDA 33462
	1
<del></del>	
	(Use attachment if necessary)
	•
CLE V: Effective date, if other than	the date of filing: (OPTIONAL)
Mostive date: 1) sennet be prior	to nor more than 90 days after the date this
	to not more than 90 days after the date this then the same as
	d Certificate of Conversion, if an effective
listed therein.)	0
REQUIRED SIGNATURE:	` //
2	$\mathcal{A}$
Signature of a member or an	aythorized representative of a member.
(In accordance with section 6	08.408(3), Florida Statutes, the execution
of this document constitutes ar	n affirmation under the penalties of perjury s stated herein are true.)

#### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Typed or printed name of signee

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

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