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



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SECRETARY OF STALE
DIVISION OF CORPORATION

10 SEP 14 AM 10: 54

T. HAMPTON
SEP 1 5 2010
EXAMNER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Dot G Productions U.C. (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:
Lietta Mayweather Gamble (Contact Person)
Dor G Productions Corp. (Firm/Company)
8740 Crestgat Circle (Address)
Orlando Fl 32819. (City, State and Zip Code)
Kiettagamble @ aol. com E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\sum_{150.00}\$ Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\sum_{150.00}\$ Filing Fees and Certificate of & \$180.00\$ Filing Fees and Certified Copy & \$185.00\$ Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SECRETARY OF STATE DIVISION OF CORPORATION

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:		
Dot G Andychions Corp		
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a <u>Cocooolo</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 Plovida		
(Enter state, or if a non-U.S. entity, the name of the country)		
on 02 25 2005 (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:		
ada Floriden.		
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:		
Dot a Productions UC.		
(Enter Name of Florida Limited Liability Company)		

Signed this 947 day of September 20 10.			
Signature of Member or Authorized Representative of Limited Liability Company:			
Signature of Member or Authorized Representative: Kitt Mayurally for be Printed Name: hete Mayurally Garable Title: President	e		
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]			
Signature: Kitta Myner Warbourbourbourbourbourbourbourbourbourbou			
Signature: Army Variable (I)			
Printed Name: Samby Gamble III Title: VP Signature: Kitta My woodful Jamba			
Printed Name: Kella Mayweather Title: Secretary Treasurer			
Signature: Title:			
Signature: 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.	SÉ!		
Fees:	XE 73		
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: \$25.00 \$30.00 (Optional) \$5.00 (Optional)	RY OF STATE		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Must end with the words "Limited Liability Company," to "LLC.")	he abbreviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of the Liability Company is:	ne principal office of the Limited
Principal Office Address:	Mailing Address:
8740 Crestgak Cir Orlando, Kl 32819	Orlandy 12 32319
Florida street address (I	Registered Agent. You must designate an SECRETARY OF STATE STATE P.O. Box NOT acceptable) FL 32819 State, and Zip
Having been named as registered agent at	nd to accept service of process for the

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
P	Kietta Mayweather Gambe 8740 Crestgate Cir Orlando, 1813 2819
18	Sammy Camble III 8740 Crestonata Can Orlando 18 32879
SEC/TRE	Kieta May reather Gamble 8740 Crestlante as Oxlandorel 32819
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the	ne date of filing:
	(OPTIONAL)
document is filed by the Florida Departm	nor more than 90 days after the date this ent of State; <u>AND</u> 2) must be the same as Certificate of Conversion, if an effective

REQUIRED SIGNATURE:

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.)

Kieta Mayurather Camble
Typed or printed 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