# 111000030877

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

Office Use Only



600196831626

03/10/11--01007--024 \*\*155.00

TIMAR IN MAIL: II

B. BOSTICK MAR 1 4 2010

**EXAMINER** 

# COVER LETTER

TO: Registration Section

Tallahassee, FL 32301

Division of Corporations				
SUBJECT: BRYNM-LANG (Name of R	Expulsing Florida Limited Company)			
(Name of R	rorida Linned Company)			
The enclosed Certificate of Conversion, Ar "Other Business Entity" into a "Florida Lin				
Please return all correspondence concerning	g this matter to:			
GARY J SCHMID  (Contact Person)  BRYNN - LANE  (Firm/Company)				
RRYNAS - LANE	-	.**		
(Firm/Company)	the second secon	$\Sigma_{S}$	_	
(City, State and Zip Code)	Ro	SEORE IN A OF STATE ALLAHASSEE, FLORIO	11 MAR I I	an Made
(Address)		33 T	<i>7</i> 0	3 5
CELERRATION F/	<i>34347</i>	Ltd -<		Carrier
(City, State and Zip Code)		الم المارية	$\equiv$	Ç 1 1
GLSCHMID @ HOTMA	311.001			المحالية .
E-mail address: (to be used for future annual report	notifications)	TE AOI	11 H	
For further information concerning this mat	tter, please call:	-		
Con T/	WELL VUZ. 2029	,		
(Name of Contact Person)	(Area Code and Daytime Telephone Numbe	<u>r)</u>		
Enclosed is a check for the following amou		,		
,	·····			
\$150.00 Filing Fees \$155.00 Filing Fees and Certificate of	\$180.00 Filing Fees and Certified Copy			
& \$125 for Articles Status of Organization)	Certificate of Status			
STREET ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P. O. Box 6327			
2661 Executive Center Circle	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: Brynn-Lane inc Po2000 8969  (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Subchapten S 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 $\frac{-1}{\sqrt{2}}$
on 3/30/2009 2-19-02 (Enter date "Other Business Entity" was first organized, formed or incorporated)
(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:
A/A PRIDA
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BRYNN- LANG 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: 3/9/2011.  (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.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this 8 day of MARC	<u>// 20                                   </u>			
Signature of Member or Authorized Representative of Limited Liability Company: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.				
Signature of Member or Authorized Repres Printed Name: GARY J SCHMID	entative: Title: PRESID	ENT, DIRECTOR		
Signature(s) on behalf of Other Business E this document are true. Any false informat s.817.155, F.S. [See below for required sign	ion constitutes a third degree felony as p nature(s).]	rovided for in		
Signature: Signature: Sazy J School	Title: PRESIDENT	DiRECTOR		
Signature: Lauric Tes/a-Sch	enf	170		
Printed Name: LAURIG 185/A-SCH	min Title: SECRETARY,	VP		
Signature:Printed Name:	/			
Signature:Printed Name:	Title:	-		
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected		MAR II I		
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	AM II: 16 OF STATE		
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	Liability Limited Partnership:	DE 6		
All others: Signature of an authorized person.				
<u>Fees:</u>				
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

BRYNN-LANE LLC  (Must end with the words "Limited Liability Company, the abbrev	
(Must end with the words "Limited Liability Company, the abbrev	iation "L.L.C.," or the designation "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the princ	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
801 DEER WOODS RD CELEBRATION, FL 34747	PO Box 470668
CELEBRATION, FL 34747	CELEBRATION FL 34747
ARTICLE III - Registered Agent, Registered C (The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)	
The name and the Florida street address of the reg	istered agent are:
GARY J	SCHM-D  Vame    SCHM-D    SCHM-D
801 DEER L	Oods Ro. O. Box NOT acceptable)  RI 2002
Florida street address (F	P.O. Box NOT acceptable)
CE/ESRATION	FL 34747
City, St	ate, 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

**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" = Managin	Member
MGRM	GARY J SCHOOLD  801 DEER WOODS RD  CELEBRATION, FL 34747
MGR	LAURICE TESTA - SCHMID BOI DEER WOODS RD CETEBRATION FL 34747
	TALLAHASSE TALLAHASSE
(Use attachment if ne	cessary)  The property of the
the Florida Department of	not be prior to nor more than 90 days after the date this document is filed by State; AND 2) must be the same as the effective date listed in the attached f an effective date listed therein.)
REQUIRED SIGNATUR	i:  Solution
Signature of a	member or an authorized representative of a member.
the penalties of perjury the document to the Departm	n 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under at the facts stated herein are true. I am aware that any false information submitted in a ent of State constitutes a third degree felony as provided for in s.817.155, F.S.)
G	Typed or printed name of signee
	Typed or printed name of signee

Page 2 of 2