

L110000066902

(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:

*Called +  
advised FIC  
unable to convert  
to LLC. Filed as  
new LLC only.  
- Det 6/6/11*

Office Use Only

FF \$125  
CC 30



400204052354

04/26/11--01008--009 \*\*150.00

06/08/11--01002--003 \*\*5.00

FILED  
11 JUN -6 PM 8:43  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*W11-23889  
NOT FILED +  
FIC NOT ABLE*

ⓑ Tedlock JUN 08 2011

### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LAWRENCE ENTERPRISE 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:

KIRK LAWRENCE  
(Contact Person)

LAWRENCE ENTERPRISE  
(Firm/Company)

155 SILVER POND ROAD  
(Address)

CRESCENT CITY, FL 32112  
(City, State and Zip Code)

KIRKKIML@YANCOO.COM  
E-mail address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

KIRK LAWRENCE at (386) 366-0170  
(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<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | <input type="checkbox"/> \$155.00 Filing Fees<br>and Certificate of<br>Status | <input type="checkbox"/> \$180.00 Filing Fees<br>and Certified Copy | <input type="checkbox"/> \$185.00 Filing Fees,<br>Certified Copy, and<br>Certificate of Status |
|--|---|---|--|

**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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 28, 2011

LAWRENCE ENTERPRISE / KIRK LAWRENCE  
155 SILVER POND RD.  
CRESCENT CITY, FL 32112

SUBJECT: LAWRENCE ENTERPRISE LLC  
Ref. Number: W11000023889

We have received your document for LAWRENCE ENTERPRISE LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is L03000051296 "LAWRENCE ENTERPRISES, LLC".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call

(850) 245-6870.

Karen A Saly  
Regulatory Specialist II

Letter Number: 911A00010415

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LAURENCE UNCH ENTERPRISE 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:**

155 SILVER POND ROAD  
CRESCENT CITY, FL 32112

**Mailing Address:**

155 SILVER POND ROAD  
CRESCENT CITY, FL 32112

**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:

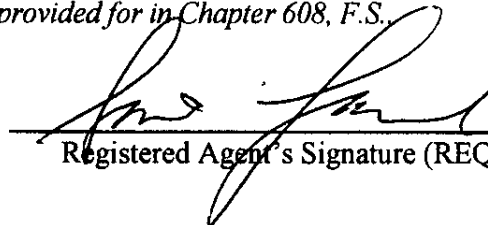
SCOTT LAURENCE  
Name

144 AMOS RD.  
Florida street address (P.O. Box **NOT** acceptable)

CRESCENT CITY, FL 32112  
City, State, and Zip

11 JUN - 6 PM 8:43  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*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)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

KIM LAWRENCE  
155 SILVER POND ROAD  
CRESCENT CITY, FL 32112

MGRM

KIRK A. LAWRENCE  
155 SILVER POND ROAD  
CRESCENT CITY, FL 32112

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

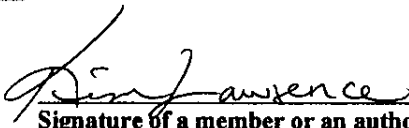
(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_

(OPTIONAL)

(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 Certificate of Conversion, if an effective date listed therein.)

**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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

KIM LAWRENCE

Typed or printed name of signee