

L11000101010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

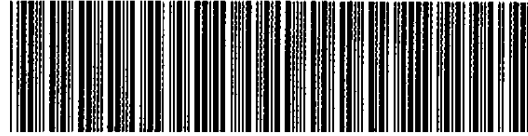
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/15/11--01009--025 **150.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W11-42795

J. BRYAN

SEP - 2 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SET YOU FREE, 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:

MILDRED WASYLKIW
(Contact Person)

SET YOU FREE, LLC
(Firm/Company)

7773 JEWEL LANE, UNIT 103
(Address)

NAPLES, FL 34109
(City, State and Zip Code)

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

For further information concerning this matter, please call:

MILDRED WASYLKIW at (239) 592-9364
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)
- \$155.00 Filing Fees and Certificate of Status
- \$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
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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 TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 26, 2011

MILDRED WASYLKIW
SET YOU FREE, LLC
7773 JEWEL LANE, UNIT 103
NAPLES, FL 34109

SUBJECT: SET YOU FREE, LLC
Ref. Number: W11000042795

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

You failed to make the correction(s) requested in our previous letter.

The converting Florida entity must be active on our records.

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.

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 411A00020002



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2011

MILDRED WASYLKIW
SET YOU FREE, LLC
7773 JEWEL LANE, UNIT 103
NAPLES, FL 34109

SUBJECT: SET YOU FREE, LLC
Ref. Number: W11000042795

done - see attached

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SET YOU FREE, 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):

The converting Florida entity must be active on our records.

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.

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 911A00019210

*From the Desk of
Mil Wasylkiw
Set You Free, LLC*

August 29, 2011

Re: Set You Free, Inc.

To Whom It May Concern,

We would like to stop the conversion request for Set You Free, Inc. to Set You Free, LLC.

Per the attached letter, we have gained permission to use *Set You Free, LLC*, and would like to proceed using *Set You Free, LLC* as our new company name. We understand that this would be a new entity.

Thank you for assistance in this matter.

Sincerely,



Mildred R. Wasylkiw
Principal Manager

Set You Free, LLC
P.O. Box 111233
Naples, FL 34108
239.592.9364

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



August 28, 2011

To Whom It May Concern,

Please accept this letter as official notice that *Set You Free, Inc.* does not intend to reinstate the corporation of *Set You Free, Inc.* Therefore, ~~we release the name for use to another entity.~~

We approve the name *Set You Free* to be used by *Set You Free, LLC.*

Sincerely,

Mildred (Mil) R. Wasylkiw
President

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SECRETARY OF STATE
TALLAHASSEE FLORIDA
FILED

Set You Free, Inc.
P.O. Box 111233
Naples, FL 34108
239.592.9364

Contact us at: setyoufreenaples@gmail.com
Visit us at: setyoufreenaples.com

When an extra set of hands is all you need, let us Set You Free.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SET YOU FREE, 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:

7773 JEWEL LN, UNIT 103
NAPLES, FL 34109

Mailing Address:

P.O. BOX 111233
NAPLES, FL 34108

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:

MILDRED R. WASYLKIW
Name

7773 JEWEL LANE, UNIT 103
Florida street address (P.O. Box **NOT** acceptable)

NAPLES FL 34109
City, State, and Zip

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TALLAHASSEE, FLORIDA

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..

Mildred R. Wasylkiw
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:

MGRM

MILDRED R. WASYLKIW
7773 JEWEL LANE, UNIT 103
NAPLES, FL 34109


(Use attachment if necessary)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.)

MILDRED R. WASYLKIW
Typed or printed name of signee