L1200009515

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
(Document Number)		

Special Instructions to Filing Officer:

M19-1036

A. LUNT

JAN 20 2011

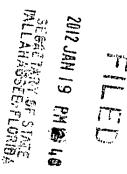
EXAMINER

Office Use Only



600215631476

01/04/12--01015--003 **150.00





January 6, 2012

LORI MOORE 3501-212 DEL PRADO BLVD. CAPE CORAL, FL 33904

SUBJECT: ZAUSNER.COM LLC Ref. Number: W12000001036

We have received your document for ZAUSNER.COM 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 Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 712A00000414

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Zausner. com LLC (Name of Resulting Florida Limited Company)	
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitte "Other Business Entity" into a "Florida Limited Liability Company" in accordance with	
Please return all correspondence concerning this matter to:	
Cape Coval Accounting Service UC	2012 JAN SESSET
3501-212 Rol Prodo Blud (Address)	ME STELFLE
Cape Coval Florida 33904 (City, State and Zip Code)	
E-mail address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
Michael Zausner at (516) 883-7773 (Name of Contact Person) (Area Code and Daytime Telephone Number	;)
Enclosed is a check for the following amount:	
\$\$\sum{\frac{\sum{\sum{\color{\color{\color{\cutee{\cutee{\cutee{\cute{\cute{\cute{\cute{\cutee{\cute{\cute{\	
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	

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: Zausner. Com LLC		
(Futon Name of Other Business Entity)		
2. The "Other Business Entity" is a <u>Cimited Liability Company</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)		
general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of New York (Enter state, or if a non-U.S. entity, the name of the country)		
on 1-1-2000		
on		
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:		
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:		
Zausner.com LLC		
(Enter Name of Florida Limited Liability Company)		
5. If not effective on the date of filing, enter the effective date: 1-1-2012. (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 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 day of	<u>up 20 12.</u>			
Signature of Member or Authorized Rep	oresentative of Limited Liability Company: ated in this document are true. Any false infor	rmation		
Signature of Member or Authorized Represented Name: Michael Zausner	rentative: Title: M6RM	- -		
this document are true. Any false informat s.817.155, F.S. [See below for required sign	ntity: Individual(s) signing affirm(s) that the ion constitutes a third degree felony as providuature(s).	led for ir		
Printed Name: Charlene Zausv	VV Title: MGR	-		
	Title:		2012 JA 1	
Signature: Printed Name:	Title:	ASSET OF	H9 81	
Signature:Printed Name:	Title:	ELONG I		C
Signature: Printed Name:	Title:	. y. .	•	
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 Signatures of ALL General Partners.	Liability Limited Partnership:			
All others: Signature of an authorized person.				
Fees:				
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:

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: 9239 Kincaid Cf Sanibel Florida 33557	Mailing Address: PO BOX 1430 Sarrivel Florida 3357
	Agent. You must designate an individual or another stered agent are: Sove ame Del Prado Blud O. Box NOT acceptable)
City, Sta	FL S3909 te, 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:

1.

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Michael Zausner
MGR	Sanibel Flora 33957 Charlene Zausner Poison 1430 Samibel Florida 33957
	ZOIZ JAN
(Use attachment if necessary)	
(The effective date: 1) cannot be prior	than the date of filing: (OPTIONAL) r to nor more than 90 days after the date this document is filed by (D) 2) must be the same as the effective date listed in the attached ive date listed therein.)
REQUIRED SIGNATURE: Signature of a member or a	an authorized representative of a member.
(In accordance with section 608.408(3) the penalties of perjury that the facts st	Florida Statutes, the execution of this document constitutes an affirmation under lated herein are true. I am aware that any false information submitted in a onstitutes a third degree felony as provided for in s.817.155, F.S.)
Micha	ed or printed name of signee