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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2012 HAR -1 Rt 1: 36

C. LEWIS

MAR - 2 2012

EXAMINER

COVER LETTER

A Division of Corporations	
SUBJECT: Creative A	ni maked Technologies, LLC lesulting Florida Limited Company)
(, , , , , , , , , , , , , , , , , , ,	conting : tortal billines company)
	ticles of Organization, and fees are submitted to convert an nited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning	g this matter to:
Mi chael J. Br. (Contact Person)	odeur
(Contact Person) (reative Animated Te (Firm/Company)	chnologies, LLC
6596 Ridgewood Dr (Address)	-
Naples, FC 34(08) (City, State and Zip Code)	
E-mail address: (to be used for future annual report n	notifications)
For further information concerning this matt	ter, please call:
(Name of Contact Person)	at (224) 723 - 7308 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amour	nt:
\$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 S185.00 Filing Fees, Certified Copy, and 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

Tallahassee, FL 32301

Tallahassee, FL 32314

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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: Creative Ammated Technologies, LL C (Enter Name of Other Business Entity)				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a Limited Liability Company. (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)				
first organized, formed or incorporated under the laws of				
(Enter state, or if a non-U.S. entity, the name of the country)				
on 3-24-2009				
(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:				
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Ceative Ammaded Technologies, 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: (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				

Page 1 of 2

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 27 day of Febru	ary 20 12.	
Signature of Member or Authorized Replindividual signing affirms that the facts statement constitutes a third degree felony as provide	ted in this document are true. Any fad for in s.817.155, F.S.	alse information
Signature of Member or Authorized Represe Printed Name: Michael 5. Brown	entative: Manager Title: Manager	<u> </u>
Signature(s) on behalf of Other Business Enthis document are true. Any false informatis.817.155, F.S. [See below for required sign	ion constitutes a third degree felony	that the facts stated in as provided for in
Signature:	ame)	
Signature: Signature: Michael J. Brade	ur Title:	·····
Signature:Printed Name:	Title:	<u>-</u> _
Signature: Printed Name:		
Signature:		五百五
Signature:Printed Name:	Title:	SE
Cignotina		me n
Signature: Printed Name:	Title:	FLORIE 3
		36
Signature:Printed Name:		>
Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected. If Florida General Partnership or Limited. Signature of one General Partner.	l, an Incorporator must sign.	
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:	
Creative Animated (Must end with the words "Limited Liability Company, the abbreviate	Technologies, L1C ion "L.L.C.," or the designation "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal street.	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6596 Ridgewood Dr Naples, FL 34108	6596 Ridge wood Dr Nagles, FL 34108
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its own Registered abusiness entity with an active Florida registration.)	Tice, & Registered Agent's Signature: Agent. You must designate an individual or another
6596 Ridge Florida street address (P.C.	J. Broden ALLARY D. Box NOT acceptable)
Naples, City, State	$\frac{FL}{\text{ee, and Zip}} \frac{54708}{\text{ee}} \frac{34708}{\text{ee}} 3470$
company at the place designated in this certificate, I have agree to act in this capacity. I further agree to complete performance of my duties, and I position as registered agent as provided for in Chapte	am familiar with and accept the obligations of my

Page 1 of 2

(CONTINUED)

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

(

FILEU

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

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Title:	Name and Address:	SECRETARY OF STATE
"MGR" = Manager "MGRM" = Managing Member		TALLAHASSEE, FLORIDA
M 6 R	Michael J. 6596 Ridge wood	Brodeur
	Naples, FL 3	4108
···		
		
		
(Use attachment if necessary)		
ARTICLE V: Effective date, if other t	(OPTIONAL)	·
(The effective date: 1) cannot be prior the Florida Department of State; <u>AN</u> Certificate of Conversion, if an effecti	r to nor more than 90 days after the da (D) 2) must be the same as the effective ive date listed therein.)	ate this document is filed by e date listed in the attached
REQUIRED SIGNATURE:	N. P.L	
Signature of a member or a	in authorized representative of a member.	
the penalties of perjury that the facts sta	Florida Statutes, the execution of this document ated herein are true. I am aware that any false in constitutes a third degree felony as provided for i	oformation submitted in a

Typed or printed name of signee