112000049540

(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
TALLAHASSEE, FLORID.

B. BOSTICK

APR 11 2012

EXAMINER

COVER LETTER

Division of Corporations SUBJECT: Jacksonville Dining Concepts, LLC. (Doc # M0400003208) (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: Gerald R Gabet Jr. (Contact Person) Jacksonville Dining Concepts, LLC (Firm/Company) 1186 Salt Marsh Circle (Address) Ponte Vedra Beach, Florida 32082 (City, State and Zip Code) jgabet@copelandsjacksonville.com E-mail address: (to be used for future annual report notifications) For further information concerning this matter, please call: 371-2796 Gerald Gabet (Area Code and Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: \$185.00 Filing Fees, \$155.00 Filing Fees \$180.00 Filing Fees \$150.00 Filing Fees (\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and & \$125 for Articles Status Certificate of Status of Organization)

STREET ADDRESS:

TO:

Registration Section

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 12 APR 10 PM 2:01

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	
Conversion is: Jacksonville Dining Concepts, LLC	M0400003208
(Enter Name of Other Busin	ess Entity)
2. The "Other Business Entity" is a Limited Liability Complete (Enter entity type. Example: corporation general partnership, common law or	n, limited partnership,
first organized, formed or incorporated under the laws of <u>Nort</u> (Enter state, or if a non-U.S. entity, the	
on July 30, 2004 (Enter date "Other Business Entity" was first organized. 3. If the jurisdiction of the "Other Business Entity" was change which it is now organized, formed or incorporated:	ed, the state or country under the laws of
4. The name of the Florida Limited Liability Company as set f Organization:	
Jacksonville Dining Concepts, LLC (Doc	# M0400003208). PER 1 2: 0
(Enter Name of Florida Limited Li	ability 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 filed by the Florida Department of State; AND 2) must be the attached Articles of Organization, if an effective date is listed.	days after the date this document is he same as the effective date listed in the
6. The conversion is permitted by the applicable law(s) governic conversion complies with such law(s) and the requirements of s	
7. The "Other Business Entity" currently exists on the official r	ecords of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this 574 day of APRIL	. 20 <u>/2</u>			
Individual signing affirms that the facts sta constitutes a third degree felony as provide		rmation		
Signature of Member or Authorized Represented Name: Gerald R Gabet Jr	sentative: Subst Jr. Title: Managing Member	. -		
this document are true. Any false informates.817.155, F.S. [See below for required sign	<u>Entity:</u> Individual(s) signing affirm(s) that the tion constitutes a third degree felony as providuature(s).]	led for i		
Signature: Such R Solet Jr Printed Name: Gerald R Gabet Jr	Title: Managing Member			
Signature: Printed Name:	Title:	- -		
	Title:			
Signature:Printed Name:	Title:	-		
Signature:Printed Name:	Title:	•		
Signature:Printed Name:	Title:	SEI	12	
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected		ORLIART AHASSEE	APR I O	The state of the s
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	OF STATE	PH 2: C	J
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	Liability Limited Partnership:	DA A)2	
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)			

\$30.00 (Optional) \$5.00 (Optional) Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Jacksonville Dining Concepts, LL (Must end with the words "Limited Liability Company, the abl	C. (Doc # M04000032 breviation "L.L.C.," or the designation "LLC.")	<u>208)</u>
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability	y Company is:
Principal Office Address:	Mailing Address:	
1186 Salt Marsh Circle	P.O. Box 801226	
Ponte Vedra Beach, Florida 32082	Acworth, Georgia 30101	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the	stered Agent. You must designate an individual or	another
(The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the	stered Agent. You must designate an individual or	another AS
(The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	stered Agent. You must designate an individual or	another AS
(The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the	registered agent are:	another 12 APR 10 SECRETARY TALLAHASSI
(The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the Gerald R Gabet Jr. 1186 Salt Marsh C	registered agent are:	another 12 APR 10 SECRETARY TALLAHASSI
(The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the Gerald R Gabet Jr. 1186 Salt Marsh C	registered agent are: Name	12 APR 10 P

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:

"MGRM" = Man	aging Member				
MGRM		Gerald R Gabet Jr.			
-	_	1186 Salt Marsh Circle			
		Ponte Vedra Beach, FL. 32082			
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(Use attachment	if necessary)				
ICLE V: Effective	ve date, if other tha	n the date of filing: (OPTIONAL) o nor more than 90 days after the date this	document i	s filed	by
ICLE V: Effective date: 1) lorida Departme ficate of Convers	cannot be prior to the state; AND ion, if an effective	n the date of filing: (OPTIONAL) o nor more than 90 days after the date this 2) must be the same as the effective date lied at the lied at lied therein.)			
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ICLE V: Effective date: 1) lorida Departme ficate of Convers	cannot be prior to the state; AND ion, if an effective	o nor more than 90 days after the date this 2) must be the same as the effective date lied date listed therein.)			
ICLE V: Effective date: 1) lorida Departme ficate of Convers UIRED SIGNAT	cannot be prior to the state; AND ion, if an effective TURE:	o nor more than 90 days after the date this 2) must be the same as the effective date lied date listed therein.)			
effective date: 1) lorida Departme ficate of Convers UIRED SIGNAT Signature (In accordance with the penalties of peri	cannot be prior to the state; AND ion, if an effective of a member or an effection of a member or an effective of a member	o nor more than 90 days after the date this 2) must be the same as the effective date lie date listed therein.)	isted in the	attacl	hed
effective date: 1) lorida Departme ificate of Convers UIRED SIGNAT Signature (In accordance with the penalties of perj document to the De	cannot be prior to the factive of State; AND ion, if an effective of a member or an esection 608.408(3), Flury that the facts state partment of State constants.	o nor more than 90 days after the date this 2) must be the same as the effective date lie date listed therein.) authorized representative of a member. lorida Statutes, the execution of this document constituted herein are true. I am aware that any false information	isted in the	attacl	hed