# L12000061954

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	: #)
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PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
,	- ·	•
(Do	cument Number)	
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Certified Copies	Certificates	of Status
Certified Copies	_ Continuates	or otatas
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Special Instructions to	Filing Officer:	





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SECRETARY OF STATE
ALL AMPRISEE GLOBB

C. LEWIS

MAY -8 2012

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: DFC Designs, LLC	CD (4) Ph   1   1   1	ital Common of the Common of t
(Name o	of Resulting Florida Lim	nted Company)
		ation, and fees are submitted to convert an empany" in accordance with s. 608.439, F.S.
Please return all correspondence concern	ing this matter to:	
Angelique Boucher, L.A.		
(Contact Person)		
Englander Fischer		
(Firm/Company)		
721 First Ave. North		
(Address)		
(City, State and Zip Code	e)	
St. Petersburg, FL 33701		
E-mail address: (to be used for future annual repo	ort notifications)	
For further information concerning this r	natter, please call:	
Angelique	at (_727)	898-7210
(Name of Contact Person)	(Area Code a	and Daytime Telephone Number)
Enclosed is a check for the following am	ount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fee and Certified Copy	
STREET ADDRESS:	MAILI	NG ADDRESS:
Registration Section		
Division of Corporations	Division of Corporations P. O. Box 6327	
Clifton Building 2661 Executive Center Circle		ox 6327 ssee, FL 32314
Tallahassee, FL 32301	i anunas	,

## **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:  DFC DESIGNS, INC.  P05000028971
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation
(Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
on 02/24/2005 .
(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:
<u>n/a</u> .
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
DFC DESIGNS, LLC
(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
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 <u>841</u> day of <u>April</u>	20 12	台灣
Signature of Member or Authorized Repr Individual signing affirms that the facts sta constitutes a third degree felony as provide	resentative of Limited Liability Company: ted in this document are true. Any false inform d for in s.817.155, F.S.	mation
Signature of Member or Authorized Represe Printed Name: DIANA I. HARVEY	entative: Title: MGRM	A Glad 13.
this document are true. Any false informati s.817.155, F.S. [See below for required signs		ed for in
Printed Name: DIANA I. HARVEY	Title: President	
Signature:	Title: Vice President	
Signature:Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected.	tor, or Officer. I, an Incorporator must sign.	
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	
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:		
DFC DESIGNS, LLC (Must end with the words "Limited Liability Company, the abbrev	viation "L.L.C.," or the designation "LLC.")	
ARTICLE II - Address: The mailing address and street address of the prin	. cipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
4195 105th Ave. N. Clearwater, FL 33762	Same	
ARTICLE III - Registered Agent, Registered C (The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ad Agent. You must designate an individual or another	
The name and the Florida street address of the reg	gistered agent are:	
<u>David Fernandez, Esq</u> ì	Name SET	Ī
721 First Avenue Nor Florida street address (F	th P.O. Box NOT acceptable)  FOR THE PROPERTY OF THE PROPERTY	

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 provide for in Chapter 608, F.S..

City, State, and Zip

St. Petersburg

egistered Agent's Signature (REQUIRED)

FL 33701

(CONTINUED)

Page 1 of 2

FILED'

	er(s) or Managing Member(s): f each Manager or Managing Member is as follows:	12 MAY -7 PM 2: 1
Title: "MGR" = Manager "MGRM" = Managing N	Name and Address:	SECRETARY OF STAT TALLAHASSEE, FLORID
MGRM	DIANA I. HARVEY	
	4195 105TH AVE. N.	<del></del>
	CLEARWATER FL 33762 US	
MGRM	STEVEN A. WICHLENSKI	
	4195 105TH AVE. N.	
	CLEARWATER FL 33762 US	
<del></del> -		
		<del></del>
·		<del></del>
		<del></del> _
(Use attachment if neces	sary)	
ICLE V: Effective date	if other than the date of filing: N/a	
TODE V. Encouve date,	if other than the date of filing: <u>n/a</u> (OPTIONAL)	
effective date: 1) cannot	be prior to nor more than 90 days after the date this	document is filed by
	ate; AND 2) must be the same as the effective date	listed in the attached
neate of Conversion, if a	n effective date listed therein.)	
<u>UIRED</u> SIGNATURE:		
, ,		
Signature of a mer	mber of an authorized representative of a member.	
the penalties of perjury that the	08.408(3), Florida Statutes, the execution of this document constitute facts stated herein are true. I am aware that any false information of State constitutes a third degree felony as provided for in s.817.	on submitted in a
DIANA I. HA	RVEY, MGRM	
	Typed or printed name of signee	<del>-</del>