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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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Hara-

B. BOSTICK
JUL **2 4** 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TAKE C (Name of R	HARGE ANYWHERE, L.C. esulting Florida Limited Company)	
	ticles of Organization, and fees are submitted to convert an nited Liability Company" in accordance with s. 608.439, F.	
Please return all correspondence concerning	this matter to:	
KEVIN S. CONE (Contact Person)		
(Firm/Company) 4961 SW 135 TH AV (Address)		
(City, State and Zip Code) CONE (SCREATIONS @ G E-mail address: (to be used for future annual report r	SELURGE TALLAHAS A DOLLAR SELURGE TALLAHAS A	erratus Caratus
For further information concerning this mat (Name of Contact Person)	ter, please call: at (186) 380 · 5093 Control of the control	TI
Enclosed is a check for the following amoun	·	
\$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 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	

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: TAKE CHARGE ANYWHERE INC.
(Enter Name of Other Business Entity)
(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
on 3/9/2012 (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:
FLORIDA, U.S.
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Company as set forth in the attached Arti
TAKE CHARGE ANGLIHERE, LLC.
The state of the s
(Enter Name of Florida Limited Liability Company) 5. If not effective on the date of filing, enter the effective date: DATE OF FILLING (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 19TH day of JULY	20 12 .	
	oresentative of Limited Liability Company ated in this document are true. Any false inte ed for in s.817.155, F.S.	
Signature of Member or Authorized Repres	entative: MGEM	
this document are true. Any false informat s.817.155, F.S. [See below for required sign	<u>Intity:</u> Individual(s) signing affirm(s) that th tion constitutes a third degree felony as prov nature(s).	
V / MI I	Title: MARM	<u> </u>
Signature: AVOPIS MAZO	Title: MGRM	_
Signature:Printed Name:	Title:	
Signature: Printed Name:	Title:	<u> </u>
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	_
If Florida Corporation: Signature of Chairman, Vice Chairman, Direct If Directors or Officers have not been selected.		~ .
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	FALLAHZ
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:	CAN CO CAME
All others: Signature of an authorized person.		HII: 32
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

Ā	R	ΓI	\mathbf{C}	LE	I	-	Na	m	e:
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The name of the Limited Liability Company is:

TAKE CHARGE AN WHERE, LLC

t end with the words "Limited Liability Company, the abbreviation "L.C." or the designation "L.C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office-Address:	Mailing Address:
11228 SW 147 PLACE MIAMI, FL. 33196	4967 BW 135" AVE MIRAMAR, FL. 33027

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

(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:

Name

Name

A967 SW 135th ANE W

Florida street address (P.O. Box NOT acceptable)

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated finited 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:

<u>Title:</u> "MGE	R" = Manager	Name and Address:	
	RM" = Managing Mem	per	
Ma	iRM	KEVIN S. CONTER	
•		4967 SW 135" AVE MIRAMAR FL 330	721
MC	<u>irm</u>	LAVORES F. MART 11218 SW 147# PL	<u>14</u>
		MIANIT, PD. 951 IQ	TAL
٠.			Jul 1
(Use a	attachment if necessary		ORIE 22
•	•	. //	
		ner than the date of filing: (OPTIONAL)	_•
the Florida	Department of State;	rior to nor more than 90 days after the date t AND 2) must be the same as the effective da	
Certificate	of Conversion, if an ef	fective date listed therein.)	
REQUIRE	<u>D</u> SIGNATURE:		
		KEX	
	Signature of a member	or an authorized representative of a member.	
the per	nalties of perjury that the fac	8(3), Florida Statutes, the execution of this document contests stated herein are true. I am aware that any false informate constitutes a third degree felony as provided for in s.8	nation submitted in a
	<u> </u>	EVIN S. CONEY	
	Т	yped or printed name of signet	



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 2, 2012

KEVIN CONEY TAKE CHARGE ANYWHERE, LLC 11228 SW 147TH PLACE MIAMI, FL 33196

SUBJECT: TAKE CHARGE ANYWHERE, INC.

Ref. Number: P12000023884

We have received your document for TAKE CHARGE ANYWHERE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to file the Certificate of Conversion and Articles of Organization total \$150.00 (\$25 filing fee for the Certificate of Conversion, \$100 filing fee for the Articles of Organization, and \$25 for the Registered Agent Designation). Enclose an additional \$30 for each certified copy requested and an additional \$5 for each certificate of status requested.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 912A00017940