# L12000096005

| equestor's Name)  |  |
|-------------------|--|
| ldress)           |  |
| idress)           |  |
| ty/State/Zip/Phon | e #)   |
| MAIT              | MAIL   |
| siness Entity Nar | me)  |
| ocument Number)   |  |
| _ Certificates    | s of Status  |
| Filing Officer:   |  |
|                   |  |
|                   |  |
|                   |  |
|                   | Idress)  Idress)  Idress)  Idress)  Idress)  WAIT  Idress Entity Name occument Number)  Certificates |

Office Use Only



600235966656

DEPARTMENT OF STATE FILL (12)

12 JUL 24 PM 1: 16 12 JUL 24 AM 9: 51

B. BOSTICK

JUL **2 5** 2012

EXAMINER

## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

07-24-2012

NAME:

DANTE'S COAL FIRED PIZZA LLC

TYPE OF FILING: CONVERSION/ARTICLES OF ORGANIZATION

COST:

\$150

**RETURN:** 

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

### **COVER LETTER**

| TO: Registration Section Division of Corporations   |  |  |                                 |     |
|---|--|--|---------------------------------|-----|
| SUBJECT: DANTE'S COAL FIRE  | ED PIZZA INC.  |  |                                 |     |
|   | of Resulting Florida Limited Comp  | any)   |                                 |     |
| The enclosed Certificate of Conversion, "Other Business Entity" into a "Florida I   | Articles of Organization, and Limited Liability Company"                                   | fees are submitted to<br>in accordance with s.                 | o convert an . 608.439, F.S.    |     |
| Please return all correspondence concern  | ing this matter to:  | n  |                                 |     |
| SHARON BABALA   |  |  |                                 |     |
| (Contact Person)  | <del></del>  |  |                                 |     |
| BLUMBERGEXCELSIOR CORPORATE   | SERVICES, INC.   |  |                                 |     |
| (Firm/Company)  |  |  |                                 |     |
| 236 BROADWAY  |  |  |                                 |     |
| (Address)   |  |  |                                 |     |
| MENANDS, NY 12204   |  |  |                                 |     |
| (City, State and Zip Code   | )  |  |                                 |     |
| PCOHEN20000@GMAIL.COM   | · · · · · · · · · · · · · · · · · · ·  |  |                                 |     |
| E-mail address: (to be used for future annual repo  | ort notifications)   |  |                                 |     |
| For further information concerning this n   | natter, please call:   |  |                                 |     |
| SHARON BABALA   | at ( 800 ) 999-0   | 350  |                                 |     |
| (Name of Contact Person)  | (Area Code and Daytim  | e Telephone Number)  |                                 |     |
| Enclosed is a check for the following am-   | ount:  |  |                                 |     |
| \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) \$\$155.00 Filing Fees<br>and Certificate of<br>Status | and Certified Copy Ce  | 85.00 Filing Fees,<br>rtified Copy, and<br>rtificate of Status | 12 JL                           | •   |
| STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301               | MAILING ADD<br>Registration Section Division of Corports P. O. Box 6327<br>Tallahassee, FL | ion<br>orations  | IL 24 AH 9:51<br>ASSEE, FLORIDA | 4 4 |

#### **Certificate of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization 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   | r to the filing of this Certificate of            |          |
|--|---|----------|
| Conversion is:   | P12000064116                                      |          |
|  |   |          |
| (Enter Name of Other Busin   | ness Entity)                                      |          |
| 2. The "Other Business Entity" is a CORPORATION  | *   |          |
| (Enter entity type. Example: corporation   |   |          |
| general partnership, common law or   | business trust, etc.)                             |          |
| first organized, formed or incorporated under the laws of FLO  | ORIDA   |          |
| (Enter state, or if a non-U.S. entity, the   | name of the country)                              |          |
| on 7/23/2012   |   |          |
| (Enter date "Other Business Entity" was first orga   | anized, formed or incorporated)                   |          |
| `  | • •   |          |
| 3. If the jurisdiction of the "Other Business Entity" was change   | ged, the state or country under the laws of       |          |
| which it is now organized, formed or incorporated:   | 12 12 12 12 12 12 12 12 12 12 12 12 12 1          |          |
|  |   |          |
|  |   | <b>-</b> |
| 4. The name of the Florida Limited Liability Company as set for  | forth in the attached Articles of                 | 14 .     |
| Organization:  | <del>, , , , , , , , , , , , , , , , , , , </del> | ,        |
|  |   | a i      |
| DANTE'S COAL FIRED PIZZA LLC   | lability Company)                                 | ****     |
| (Enter Name of Florida Limited Lia   | ability Company)                                  |          |
| 5. If not offective on the date of filing enter the offective date.  | . · · · · · · · · · · · · · · · · · · ·           |          |
| <ol> <li>If not effective on the date of filing, enter the effective date:</li> <li>(The effective date: 1) cannot be prior to nor more than 90</li> </ol> |   |          |
| filed by the Florida Department of State; AND 2) must be the   | •   |          |
| attached Articles of Organization, if an effective date is liste   |   |          |
| ,  | •   |          |
| 5. The conversion is permitted by the applicable law(s) governing conversion complies with such law(s) and the requirements of s                           |   |          |

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 24m day of Nb   | 20/2  |                  |         |                       |
|---|---|------------------|---------|-----------------------|
| Signature of Member or Authorized Re  | presentative of Limited Liability Company: tated in this document are true. Any false infor | mation           |         |                       |
| Signature of Member or Authorized Repre<br>Printed Name: SHARON BABALA  | sentative: Macrosson Title: authorized representative                                       |                  |         |                       |
| this document are true. Any false informs s.817.155, F.S. [See below for required sig                             | ***   | ed for in        | d in    |                       |
| Signature: Shawkolk   | Title: INCORPORATOR   |                  |         |                       |
| Printed Name: SHARON BABALA   | Title: INCORPORATOR   |                  |         |                       |
| Signature   |   |                  |         |                       |
| Printed Name:   | Title:  |                  |         |                       |
|   |   |                  |         |                       |
| Signature:  | Title:  |                  |         |                       |
| Timod Ivanie.   | 1100.   |                  |         |                       |
| Signature:  | Title:  |                  |         |                       |
| Printed Name:   | Title:  |                  |         |                       |
| Signature:  | 4.000   |                  |         |                       |
| Printed Name:   | Title:  |                  |         |                       |
| Signature:  |   |                  |         |                       |
| Printed Name:   | Title:  |                  |         |                       |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Dire If Directors or Officers have not been selecte |   |                  | A       |                       |
| If Florida General Partnership or Limited Signature of one General Partner.                                       | Liability Partnership:  | LAMES            | 2 JUL 2 | 2015 J.<br>J. (1      |
| If Florida Limited Partnership or Limited Signatures of ALL General Partners.                                     | Liability Limited Partnership:  | ST-              | Î       | , , ,                 |
| All others: Signature of an authorized person.  |   | CORIDA<br>TORIDA | 9:<br>  | 1 <sub>me m</sub> , 1 |
| Fees:   |   |                  |         |                       |
| Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:      | \$25.00<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional)<br>Page 2 of 2               |                  |         |                       |