# L12000101347

(Requestor's Name)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)
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SECRETARY OF STATE
TALLAHASSEE, FLORID A SECRETARY OF STATE
TALLAHASSEE. FLORID

AND AND FILED

D. BRUCE

AUG 0 7 2012

**EXAMINER** 

## **COVER LETTER**

	TO: Registration Section Division of Corporations		
	SUBJECT: Type Coach, LLC		
	(Name of Resulting Florida Limited Company)		
	The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 6		
	Please return all correspondence concerning this matter to:		
	Carly Toomey (Contact Person)		
	Type Coach, LLC		
	119 Cushing Rd.  (Address)		
	Neumarket, NH 03857	SEC SEC	12 /
	(City, State and Zip Code)  Cary a type-Coach. Com  E-mail address: (to be used for future annual report notifications)	HASSERY KENIGH	AUG-6 F
	For further information concerning this matter, please call:	)F S	PM 12: 20
1,	(Name of Contact Person) at (Lol 7) 784-5976 (Area Code and Daytime Telephone Number)	NED A	20
	Enclosed is a check for the following amount:		
6	\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$155.00 Filing Fees and Certified Copy Status  \$185.00 Filing Fees and Certified Copy 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		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

## **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:  TypeCoach, LLC (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>limited mathematically</u> .  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of MA (Enter state, or if a non-U.S. entity, the name of the country)
1   <b>1   1   1   1   1   1   1   1   1</b>
On 15007 (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:
NH (New Hampshire)
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Type Couch, 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: <u>Immediately</u> .  (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 States AND 2) must be the same as the effective date listed in the
filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the

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.

attached Articles of Organization, if an effective date is listed therein.)

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 3rd day of Augu	1st 2012.	
	presentative of Limited Liability Company rated in this document are true. Any false intended for in s.817.155, F.S.	
Signature of Member or Authorized Representation Name: Carly Toome	sentative: Carly 9. Loane Title: Founder, Prine	tipal
Signature(s) on behalf of Other Business I this document are true. Any false informa s.817.155, F.S. [See below for required signature]	Entity: Individual(s) signing affirm(s) that the tion constitutes a third degree felony as proving ture(s).]	ne facts stated in vided for in
Signature: for Johnes Printed Name: Pobert Toomes	Title: Principal	
Signature:Printed Name:	Title:	<u></u>
Signature:Printed Name:	Title:	<del></del>
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	SECR TALLA
Signature:Printed Name:	Title:	AUG -6 F
If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selecte		PMI2: 20 OF STATE ELFLORIDA
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	• ′
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> 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)	

\$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:			
(Must end with the worlds "Limited Liability Company, the abbreviation "L.L.C.," or the designation "LLC.")			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co	ompany is:		
Principal Office Address:  Mailing Address:			
8101 Deer brook Circle Same Sarasota, FL 34238			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatu (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or anot business entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are:	SEC	7	
Nancy Levine	XETARY AHASSE	AUG-6	AFFA AN FILI
2869 Sandring ham Place Florida street address (P.O. Box NOT acceptable)	OF STAT	PM 12: 2	
Sa acata - 2417	ह्यान	0	

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:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member  (C)	Robert Vincent Toomey 8101 Decrepook Circle Sacrasota FL 234238
MGRM	Carly Toomery 8101 Deerbrook Circle 30 raso to FL 34238
	FILED  12 AUG -6 PH I2: 2  SECRETARY OF STATE ALLAHASSEE.FLORE
The effective date: 1) cannot be prior	han the date of filing:  (OPTIONAL)  r to nor more than 90 days after the date this document is filed by  D 2) must be the same as the effective date listed in the attached
Signature of a member or a (In accordance with section 608.408(3),	In authorized representative of a member.  Florida Statutes, the execution of this document constitutes an affirmation under lated herein are true. I am aware that any false information submitted in a
document to the Department of State co	onstitutes a third degree felony as provided for in s.817.155, F.S.)

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