# 11260107032

(Requesto	's Name)	
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(City/State	/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Business	Entity Name)	
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Certified CopiesC	ertificates of	Status
Special Instructions to Filing C	officer:	
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Office Use Only



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SECRETARY OF STATE

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T. CLINE
AUG 20 2012
EXAMINER



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2012

ELIZABETH M. BATCHELDER-CUMMINGS 1395 MOHAWK ROAD VENICE, FL 34293

SUBJECT: TIME2GO... LLC Ref. Number: W12000041044

We have received your document for TIME2GO... LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not allow a sole proprietorship to file a conversion. A sole proprietorship is a business owned and operated by one individual. As a sole proprietor, the one individual owner is responsible for making all of the business decisions and all of the debts of the business are considered to be the debts of the one individual owner, as well. The sole proprietorship may or may not conduct business under the one individual owner s legal name. Because the business and the individual are considered as one organization and need each other to co-exist from a legal perspective, a sole proprietorship is not considered a business entity and cannot, therefore, file a conversion under Florida law.

If your sole proprietorship is actually owned and operated by two or more individuals and those individuals serve in the capacity of a partner, your business may not be a sole proprietorship. Your business may meet the definition of a partnership in accordance with Chapter 620, Florida Statutes. Chapter 620, Florida Statutes, allows a partnership to file a conversion. However, the partnership must first file a statement of registration in accordance with section 620.8105, Florida Statutes.

We are enclosing a statement of registration should your business entity meet the criteria of a partnership and you wish to proceed with the conversion. Please note the fee to register a partnership is \$50. To proceed with the conversion, please correct your conversion documents to reflect your current business entity is a partnership and resubmit the conversion documents along with the enclosed registration statement and an additional fee of \$50.

This office strongly suggests that you seek legal advice concerning this matter.

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  $(850)\ 245-6051$ .

Tammi Cline Regulatory Specialist II

Letter Number: 112A00020353

SEGRETARY OF STATE

www.sunbiz.org

# **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Time2Go LLC		
	ed Liability Company	
The enclosed Articles of Organization and fee(s) are s	submitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Elizabeth M. Batchelder-C	Cummings Name of Person	<u></u>
Time2Go	Name of reison	
	Firm/Company	
1395 Mohawk Road		
	Address	
Venice, Florida 34293		Zalo Aug Sciret
•	y/State and Zip Code	
beth2go@gmail.com	or future annual report notification)	<u>်က်ညီ —</u> မူကာ
For further information concerning this matter, please	•	TA RE
roi futurei information concerning this matter, prease	s can.	AN 36 36 CFLORION
Elizabeth Batchelder-Cummings	at ( 941 ) 780-9819	
Name of Person	Area Code & Daytime Telephone Numb	er
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{Certificate of Status}\$	Certified Copy Certifica (additional copy is enclosed) Certified	Filing Fee, te of Status & I Copy I copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Tready for \$ 185.00

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Time2Go LLC		
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	of the principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
1395 Mohawk Road	1395 Mohawk Road	
		·
Venice, FL 34293	Venice, FL 34293	Signature
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its obusiness entity with an active Florida registration.)	gistered Office, & Registered Agent's	Signature:
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its of business entity with an active Florida registration.)	gistered Office, & Registered Agent's own Registered Agent. You must designate an individual control of the con	dual or another
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	gistered Office, & Registered Agent's own Registered Agent. You must designate an individual control of the con	dual or another
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	gistered Office, & Registered Agent's own Registered Agent. You must designate an individual of the registered agent are:	dual or another
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	gistered Office, & Registered Agent's own Registered Agent. You must designate an individual of the registered agent are:  chelder-Cummings  Name	dual or another
ARTICLE III - Registered Agent, Registered Agent, Registered Agent, Registered Agent, Registre Limited Liability Company cannot serve as its of business entity with an active Florida registration.)  The name and the Florida street address  Elizabeth M. Bat	gistered Office, & Registered Agent's own Registered Agent. You must designate an individual of the registered agent are:  chelder-Cummings  Name	dual or another

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)

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Elizabeth M. Batchelder-Cummings
	1395 Mohawk Road
	Venice, FL 34293
<del></del>	
	And the state of t
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: 09/01/2012 . (OPTIONAL) be specific and cannot be more than five business days prior
CLE V: Effective date, if other than the effective date is listed, the date must be	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:	M Satuldu Current and member.
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Classiff Signature of a memb  (In accordance with section 60 constitutes an affirmation under lam aware that any false infor	Description and cannot be more than five business days prior  Let of an authorized representative of a member.  18.408(3), Florida Statutes, the execution of this document to the penalties of perjury that the facts stated herein are true; remation submitted in a document to the Department of States are provided for in \$ 817, 155, E.S.)
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of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)