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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT.	MAIL
(Bu	isiness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 2, 2013

ERNEST G MASSENGALE 1316 N EAST AVE SARASOTA, FL 34237

SUBJECT: MR MOPED LLC Ref. Number: W13000000092



We have received your document for MR MOPED 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.

Gina McLeod Regulatory Specialist II

Letter Number: 713A00000047

www.sunbiz.org

DO DOV COOF III

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MR MOPED LLC	
(Name	of Resulting Florida Limited Company)
	, Articles of Organization, and fees are submitted to convert an Limited Liability Company" in accordance with s. 608.439, F.S. ming this matter to:
Ernest G Massengale	
(Contact Person)	
MR MOPED LLC	
(Firm/Company)	
1316 N East Avenue	
(Address)	
Sarasota, Florida 34237	
(City, State and Zip Co.	de)
mistermoped@msn.com	•
E-mail address: (to be used for future annual re	port notifications)
For further information concerning this	matter, please call:
Ernest G Massengale	<u>ät (941) 366-6733 </u>
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following ar	nount:
\$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 \$185.00 Filing Fees, Certified Copy; and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations P. O. Box 6327
Clifton Building 2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	runanussee, Lis Sastr

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
MR MOPED LLC (Must end with the words "Limited Liability Company, the abbrevia	ation "L.L.C.," or the designation "LLC.")
ARTICLE II - Address:	·
The mailing address and street address of the princi	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1316 N East Avenue	1316 N East Avenue
Sarasota, Florida 34237	Sarasota, Florida 34237
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	ffice, & Registered Agent's Signature: Agent. You must designate an individual or another
The name and the Florida street address of the registered agent are:	
ERNEST G MASSENGALE	
N	ALE DEC 28
385 OAK HILL DRIVE	
Florida street address (P.	O. Box NOT acceptable)
SARASOTA,	FL 34232 55 .
City, Sta	ate, and Zip

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..

End & Masser (ale 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> "MGR" = Manager "MGRM" = Managing	Name and Address: Member		
MGRM	ERNEST G MASSENGALE 385 OAK HILL DRIVE SARASOTA, FL 34232		
MGR	LINDA RANDALL 385 OAK HILL DRIVE SARASOTA, FL 34232		
(Use attachment if nece			
ARTICLE V: Effective date, if other than the date of filing: 1/2/2013 (OPTIONAL) (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 Certificate of Conversion, if an effective date listed therein.)			
REQUIRED SIGNATURE:			
Signature of a m	Massucce nember or an authorized representative of a member.		
(In accordance with section the penalties of periury tha	608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the facts stated herein are true. I am aware that any false information submitted in a not of State constitutes a third degree felony as provided for in s.817.155, F.S.)		
	MASSENGALE Typed or printed name of signee		