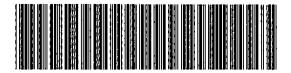
L13000007039

(Re	questor's Name)	
(Address)		
(Address)		
(Čit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer: -		

Office Use Only



800242889978

12/31/12--01032--005 **150.00

13 JAN 11 AH 8: 07



COVER LETTER

Division of Corporations
SUBJECT: DIXIE AC, LLC (Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
Bryan Capes (Contact Person) Dixie AC, LLC (Firm/Company)
(Firm/Company) P.O. Box 2396 (Address)
(Address) Tallahasse, FL 32316 (City, State and Zip Code) haven management@mediacombb.net E-mail address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
BeTty Capps at (850) 539-5923 (Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & \$155.00 Filing Fees and Certificate of Status of Organization) \$150.00 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

13 JAN 11 PM 4: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

January 3, 2013

BRYAN CAPPS P O BOX 2396 TALLAHASSEE, FL 32316

SUBJECT: DIXIE AC, LLC Ref. Number: W13000000573

We have received your document for DIXIE AC, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return the corrected original and one copy of 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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 013A00000202

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:				
Dixe AC, Inc. (Enter Name of Other Business Entity)	<u> </u>			
(Enter Name of Other Business Entity)	ω			
2. The "Other Business Entity" is a <u>Corporation</u>	13 JAN 11			
(Enter entity type. Example: corporation, limited partnership,				
general partnership, common law or business trust, etc.)				
first organized, formed or incorporated under the laws of Florida	GRATION 18 0.7			
(Enter state, or if a non-U.S. entity, the name of the country)				
on H1=12013 11/5/03.				
4. The name of the Florida Limited Liability Company as set forth in the attached Article Organization:	es of			
Dixie AC, LLC				
(Enter Name of Florida Limited Liability Company)				
5. If not effective on the date of filing, enter the effective date: 122013. (The effective date: 1) cannot be prior to nor more than 90 days after the date this do filed by the Florida Department of State; AND 2) must be the same as the effective data 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 conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting				

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 12 day of Januar	20 <u>√3</u>			
Signature of Member or Authorized Representative of Limited Liability Company: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.				
Signature of Member or Authorized Representation Name: BRYAN CAPPS	rentative: Title: Owner	- -		
Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]				
Signature:	Title: PRESIDENT	_		
Printed Name: HRYAN CAPI	Title: YRESIDENT	-		
Signature:	Title:	_		
Printed Name:	Title:	-		
Signature:		_		
Printed Name:	Title:	_		
Signature:		_		
Printed Name:	Title:	_		
Signature:				
Printed Name:	Title:	- -		
Signature:				
Printed Name:	Title:	- 		
If Florida Corporation:				
Signature of Chairman, Vice Chairman, Direct	ctor, or Officer.			
If Directors or Officers have not been selecte	d, an Incorporator must sign.			
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:			
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:	13 J		
All others: Signature of an authorized person.		NACH SECTION		
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	RANGUS 8: 07		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Dxie AC, LLC (Must end with the words "Limited Liability Co	mpany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princip	
Principal Office Address: M	ailing Address:
867 Dupont Rd: Havana, FL 32333	P.O. Box 2396 Tallahassee, FL 30316
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its own Registered A business entity with an active Florida registration.)	
The name and the Florida street address of the regist	ered agent are:
Belly Capps Name	
Saa Mat Lang Florida street address (P.O. Box <u>NOT</u> acceptable)
Havana FL City, State, ar	<u> 32333</u> nd Zip
Having been named as registered agent and to accept liability company at the place designated in this cregistered agent and agree to act in this capacity. It all statutes relating to the proper and complete per and accept the obligations of my position as register	ertificate, I hereby accept the appointment as I further agree to comply with the provisions of formance of my duties, and I am familiar with
Registered Agent's Signature (I	REQUIRED)
(CONTINUEI	
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 Member	Name and Address:
NGR	Bryan Capps 867 Dupont Rd. Havana, FL 32333
(Lise attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: January 12, 2013. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)