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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE FLORING

N. Culligan FEB 14 2013

COVER LETTER **

TO: Registration Section Division of Corpor	
SUBJECT: MannMa	xx Management, LLC
	(Name of Resulting Florida Limited Company)
	f Conversion, Articles of Organization, and fees are submitted to convert an ito a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspon	idence concerning this matter to:
Thomas Mann	
(Co	entact Person)
MannMaxx Managem	ent, LLC
(Fir	m/Company)
550 Okeechobee Blvo	d, Unit 1701
	(Address)
West Palm Beach,	FL 33401
	tate and Zip Code)
mannmaxx1@yahoo E-mail address: (to be used for	future annual report notifications)
For further information co	ncerning this matter, please call:
Ellen Mann (Name of Contact Pers	son) at (203) 803-3697 (Area Code and Daytime Telephone Number)
Enclosed is a check for the	e following amount:
	5.00 Filing Fees Certificate of and Certified Copy \$180.00 Filing Fees 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

FILED 2013 FEB 13 AM IO: 53

:p*.**

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:
MannMaxx Management, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Corporation.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of CT
(Enter state, or if a non-U.S. entity, the name of the country)
on <u>December, 2008</u> . (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:
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MannMaxx Management, LLC (Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: (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 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 and the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion.

currently organized, formed or incorporated.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

Signed this 8th day	of <u>February</u>	_ 20 <u>13 </u> .	
	s that the facts stated in t	tive of Limited Liability Company: his document are true. Any false inform a s.817.155, F.S.	nation
Signature of Member or A	uthorized Representative	Thong man	
Printed Name: Thomas M	ann	Title: Founder & Managing Member /	GRM
this document are true. A s.817.155, F.S. [See below	ny false information con for required signature(s	,	
Signature:	m		
Printed Name:	4.5 MANN	Title: MGRM	
Printed Name	*************************************	Title:	
Timed rame,			
Signature:			
		_ Title:	
Signature:		Title:	
Printed Name:		Title:	
Signature:		TO: 1	
Printed Name:		Title:	
Signature:			
Printed Name:		_ Title:	
If Florida Corporation: Signature of Chairman, Vid If Directors or Officers hav If Florida General Partne	ce Chairman, Director, or Greenot been selected, an Inc	Officer. corporator must sign.	
Signature of one General P		y ratthership.	
If Florida Limited Partne Signatures of <u>ALL</u> Genera		y Limited Partnership:	
All others: Signature of an authorized	person.		
Fees:			
Certificate of Conversion: Fees for Florida Articles of Certified Copy: Certificate of Status:	of Organization: \$125.0 \$30.00 \$5.00		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company i	S:	
MannMaxx Management, LLC		
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
550 Okeechobee Blvd, Unit 1701	550 Okeechobee Blvd, Unit 1701	
West Palm Beach, FL 33401	West Palm Beach, FL 33401	
(The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the		
Eilen Mann		
Nan	ne	
550 Okeechobee Blvd, Unit 1	701	
Florida street a	address (P.O. Box NOT acceptable)	
West Palm Beach	_{FL} 33401	
City,	State, and Zip	
Having been named as registered agent and t	o accept service of process for the above stated limited	

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:

MGRM	Thomas Mann
	550 Okeechobee Blvd, Unit 1701
	West Palm Beach, FL 33401
Use attachment if necessary)	
LE V: Effective date, if other that	n the date of filing: (OPTION must be specific and cannot be more than five busing

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.)

Thomas Mann

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)

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