

L140000015768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

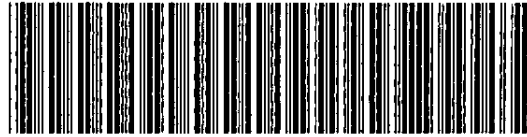
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/22/13--01009--019 **150.00

FILED
14 JAN 28 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 29 2014

T. BROWN

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HAS Life, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shanna St. George

Name of Person

Firm/Company

5036 Bonito Drive

Address

New Port Richey, Florida 34652

City/State and Zip Code

haslifeinfo@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Dyer

at (

727

7553476

Name of Person

Area Code

Daytime Telephone Number

Previously Submitted and being held are FUDS
~~Enclosed is a check~~ for the following amount:

☐

\$125.00 Filing Fee

☒

\$130.00 Filing Fee &
Certificate of Status

☐

\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐

\$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional 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



Christopher C. Dyer, Esq.*
Paul J. Knudsen, Esq.*

**Former State Prosecutor*

November 20, 2013

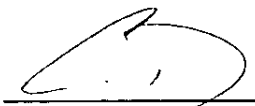
Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: HAS Life, LLC Conversion

Dear Sir or Madam:

Enclosed herewith is the Certificate of Conversion and Articles of Organization and a check for 150.00 for the Filing Fee for the above referenced conversion. Please send further communications to the undersigned at the below referenced address or chris@dyerknudsen.com. Thank you for your courtesy in this matter.

Sincerely,
Dyer Knudsen, PLLC



Christopher C. Dyer

CD

DYER KNUDSEN LAW

www.dyerknudsenlaw.com

8520 Government Drive, Ste. 4
New Port Richey, FL 34654
727.755.3476

708 S. Church Ave.
Tampa, FL 33609
813.463.8014

Christopher C. Dyer, Esq.
Paul J. Knudsen, Esq.

January 20, 2014

Department of State
Division of Corporations
Attn: Teresa Brown
P.O. Box 6327
Tallahassee, FL 32314

RE: HAS Life, LLC Articles of Organization,

Dear Ms. Brown:

Pursuant to our conversation on January 17, 2014, I have enclosed a new Articles of Organization for HAS Life, LLC., and a statement from Shanna St. George (Shea), indicating that she is, in fact, Shanna Shea, and that as Incorporator for H.A.S. Life, Inc., she is releasing the name to be used in HAS Life, LLC, and that H.A.S. Life, Inc., is dissolving. If it meets your satisfaction, please file the enclosed articles and apply the funds that you are holding to pay the filing fee, as soon as possible. IF you have any other requirements, or anything prohibits this filing, please contact me at 727-755-3476 or chris@dyerknudsen.com. Thank you for your help and courtesy in this matter.

Sincerely,
Dyer Knudsen, PLLC



Christopher C. Dyer

CD

Enclosures:

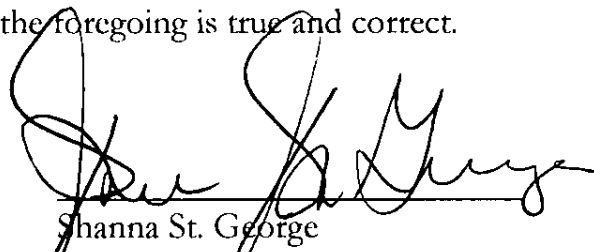
- 1- Marriage License
- 2- Articles of Organization
- 3- Letter from Mrs. St. George

January 20, 2014

Dear Ms. Brown:

I, Shanna St. George, previously "Shanna Sheca," and hereby state that I am the incorporator of H.A.S. Life, Inc., a Florida Corporation Not for Profit. As incorporator I have not held an organizational meeting to determine directors or principals. I am the sole person authorized to act on behalf of the Corporation. I hereby release the Name HAS Life to HAS Life, LLC, forever. HAS Life, Inc. shall dissolve and will not be reinstated.

I declare under the penalty of perjury that the foregoing is true and correct.



Shanna St. George

CD

DYER KNUDSEN LAW

www.dyerknudsenlaw.com

8520 Government Drive, Ste. 4
New Port Richey, FL 34654
727.755.3476

708 S. Church Ave.
Tampa, FL 33609
813.463.8014

Christopher C. Dyer, Esq.
Paul J. Knudsen, Esq.

December 26, 2013

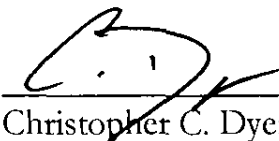
Department of State
ATTN: Teresa Brown
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: H.A.S. Life, Inc.

Dear Ms. Brown:

I am in receipt of your December 4, 2013 letter indicating that we may not convert a non-profit corporation to an LLC. Thank you for promptly informing us. I have now enclosed the Articles of Organization for a new LLC, HAS Life, LLC. Please file this document with the funds previously submitted. Upon HAS Life LLC's registration, we will begin the process of dissolving HAS Life, Inc. I appreciate your attention to this matter, I am always available at 727 777 1572 and chris@dyerknudsen.com.

Sincerely,
Dyer Knudsen Law



Christopher C. Dyer, Esq.

CD



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2013

CHRISTOPHER C DYER, ESQ
DYKER KNUDSEN
6936 W LINEBAUGH AVE STE 101
TAMPA, FL 33625

SUBJECT: H.A.S. LIFE, INC.
Ref. Number: N13000003617

We have received your document for H.A.S. LIFE, INC. 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 Florida Statutes prohibits a Florida non-profit corporation from being a party in a conversion. A Florida non-profit corporation may be a party in a merger; however, the Florida non-profit corporation must be the surviving entity.

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 513A00027630

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HAS Life, LLC

(Must end with the words "Limited Liability 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:

725 5th Street South
Safety Harbor, Florida, 34695

Mailing Address:

5036 Bonito Drive
New Port Richey, Florida 34652

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Shanna St. George

Name

5036 Bonito Drive

Florida street address (P.O. Box **NOT** acceptable)

New Port Richey

City

FL 34652

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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
14 JAN 28 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Shanna St. George

5036 Bonito Drive, New Port Richey, Florida 34652

MGR

Lori Beucier

11911 Pine Forest Drive, New Port Richey, Florida 34653

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:


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

(In accordance with section 605.0203 (1) (b) 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.)

Shanna St. George

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)