

L14000020903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

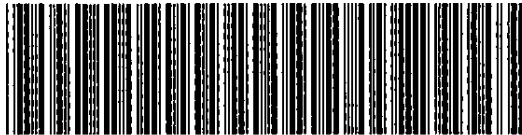
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W14-1723

Office Use Only



200255152532

01/06/14--01003--011 **150.00

FILED
2014 FEB -5 PM 4:22
SOUTH DAKOTA
FALLAHOUSE OF RECORD

FEB 06 2014
D. BRIDGE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2014

LEEANNE W. GRAZIANI
LAW OFFICE OF LEEANNE W. GRAZIANI, CPA
1924 SANTA BARBARA BLVD, SUITE #1
NAPLES, FL 34116

SUBJECT: SIGN UP, LLC
Ref. Number: W14000001723

We have received your document for SIGN UP, 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filings its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document number of the name conflict is L09000053742 "SIGNS UP, L.L.C."

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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 FEB -5 PM 4:22

FILED

Deborah Bruce
Regulatory Specialist II

Letter Number: 414A00000611

FILED

2014 FEB -5 PM 4:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sign Up, 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. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Leeanne W. Graziani

(Contact Person)

Law Office of Leeanne W. Graziani, CPA

(Firm/Company)

1924 Santa Barbara Blvd, Suite #1

(Address)

Naples, FL 34116

(City, State and Zip Code)

lwgraziani@gmail.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Leeanne W. Graziani at (239) 348-7741

(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
& \$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:

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

FILED
2014 FEB -5 PM 4:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

This Certificate of Conversion **and attached Articles of Organization** are submitted to convert the following **"Other Business Entity"** into a **Florida Limited Liability Company** in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
2 Wives, Inc. (d/b/a Sign Up)

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a S Corporation (Document No. P00000081412)
(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
(Enter state, or if a non-U.S. entity, the name of the country)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Sign Up of Naples, LLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: _____
(The effective date: 1) cannot be prior to date of receipt or filed date 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.)

5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

FILED
2014 FEB -5 PM 4:22
CLERK OF STATE
TALLAHASSEE FLORIDA

Signed this 31st day of December 2013.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Steven E. Loyd
Printed Name: Steven Loyd Title: Manager Member

Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Steven E. Loyd
Printed Name: Steven Loyd Title: President/Director

Signature: _____
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, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

FILED
2014 FEB -5 PM 4:22
CLERK OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sign Up of Naples, 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:

3575 19th Ave SW

Naples, FL 34117

Mailing Address:

3575 19th Ave SW

Naples, FL 34117

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:

Jamie E. Loyd

Name

3575 19th Ave SW, Naples, FL 34117

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

FL

City

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..

Jamie E. Loyd

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
2014 FEB -5 PM 4:22
CLERK 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

AMBR

Name and Address:

Steven Loyd

3575 19th Ave SW

Naples, FL 34117

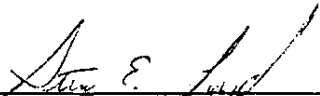
(Use attachment if necessary)

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.)

Steven Loyd

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)

FILED
FEB - 5 PM 4:23
DEPT. OF STATE
TALLAHASSEE, FLORIDA