# \*L14000031066

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· <del></del>
Special Instructions to Filing Officer:

Office Use Only



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2014 FEB 20 AM II: 12
SECRETARY OF STATE
TALL AHASSEE, FLORIDE

FILEU

K.SALY EXAMINER FEB 2 4 2014



February 5, 2014

RICHARD DOUPE 18449 FLAMINGO RD. FORT MYERS, FL 33967

SUBJECT: DOUPE SERVICES, LLC

Ref. Number: W14000007592

We have received your document for DOUPE SERVICES, 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):

Sections 607.1113, 605.0203, 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 an authorized representative. 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.

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.

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.

Karen A Saly Regulatory Specialist II

www.sunbiz.org

Letter Number: 014A00002625

#### **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: Doupe	Services, LLC		
	(Name	of Resulting Florida	Limited Company)
			vation, and fees are submitted to convert an "Othery" in accordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:	
Richard Doupe			
	(Contact Person)		-
Doupe Services	s, LLC		
<del></del>	(Firm/Company)		=
18449 Flaminge	Rd.		
	(Address)		-
Fort Myers, FL	33967		
(0	City, State and Zip Code)		-
richdoupe@gm	ail.com		
	e used for future annual re	port notifications)	-
For further information	on concerning this ma	tter, please call:	
Richard Doupe		at (239	,246-6337
(Name of Contact	et Person)		(Daytime Telephone Number)
Enclosed is a check for	or the following amou	int:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Copy	
STREET ADDRESS Registration Section Division of Corporati Clifton Building		Registra Division	ING ADDRESS: ration Section on of Corporations Box 6327
2661 Executive Cente	er Circle	Tallahas	assee, FL 32314

Tallahassee, FL 32301

## **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.605.1045, Florida Statutes.

Doupe Services, Inc. 1040001403 (Enter Nam	e of Other Business Entity)
2. The "Other Business Entity" is a Co	rporation
(Enter	entity type. Example: corporation, limited partnership, neral partnership, common law or business trust, etc.)
First organized, formed or incorporated u	nder the laws of Florida
on 10/11/2004	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporat	ion)
3. The name of the Florida Limited Liabi	lity Company as set forth in the attached Articles of Organization:
Doupe Services, LLC	
(Enter Name of Flori	ida Limited Liability Company)
4. If not effective on the date of filing, en	ter the effective date: 02/01/2014 \$\tau 2 \begin{array}{  \partial 26 \partial 9014 \end{array}}
(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 Florid date listed in the attached Articles of O	rganization, if an effective date is listed therein.)

Page 1 of 2

Signed this 29th day of January	20_14
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Richard Doupe	Title: President
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).]
Signature: Richard Doupe	
Printed Name: Kichard Douge	Title: Inderportor
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
Simplemen	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - The name of th	Name: e Limited Liability Company	/ is:	
Doupe Services, LI	LC		
<u></u>		iability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - The mailing ad		e principal office of the Limited	l Liability Company is:
Principal Offic	ce Address:	Mailing Address:	
18449 Flamingo Ro	<b>j</b>	18449 Flamingo Rd.	
Fort Myers, FL 3396	67	Fort Myers, FL 33967	
Γhe name and t	he Florida street address of the Richard Doupe		2014 FEB 20 AM 11: 12 SECRETARY OF STATE TALLAMASSEE, FLORIDA
		ame	FEB 20 AM II: CARENARY OF STA
	18449 Flamingo Rd.		SEE T
	Florida street address (I	P.O. Box NOT acceptable)	FST
	Fort Iviyers	FL 33967	器 72
	City	Zip	<del>ح</del> ت
liability co registered age statutes rela	ompany at the place designated ent and agree to act in this cap eting to the proper and comple obligations of my position as	d to accept service of process for d in this certificate, I hereby accepacity. I further agree to comply te performance of my duties, and registered agent as provided for ignature (REQUIRED)	ept the appointment as with the provisions of all I I am familiar with and

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authori "MGR" = Manager		Name and Address:
AMBR/MGR		Richard Doupe
<del></del>		18449 Flamingo Rd.
		Fort Myers, FL 33967
<i>a</i>		
(Use attachment if r	ecessary)	
CLE V: Effective dat effective date is listed 90 days after the date	d, the date must l	date of filing: 2/11/2014 2/28/2014 (OPTIONAL) be specific and cannot be more than five business days
CLE VI: Other provis	ions, if any.	

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.)

Richard Doupe

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)