LI400010a343

(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:
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Office Use Only



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2014 JUN 23 PM 12: 24

EFFECTIVE DATE 07/01/14

1000 6 2014 3. BRUCI

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Kaikos (Name o	Peoductions of Resulting Florida Limite	d Company)	
The enclosed Articles of Conversion, Articl Business Entity" into a "Florida Limited Lie			
`Please return all correspondence concerning	g this matter to:		
Katheyn Smith (Contact Person) Kairos Productu (Firm/Company) 803 Buena Vista (Address)	ons, Inc. DR.		
Eustis FL 3272 (City, State and Zip Code) Kategsmith 02 (a E-mail Address (to be used for future annual rep	26 Ognail. Con portnotifications)	7	
For further information concerning this mat	ter, please call:		201
(Name of Confact Person)	at (352) (Area Code) (Day	ytime Telephone Number)	JUN 23
Enclosed is a check for the following amou	nt:		eren e
\$\\$\\$50.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\begin{align*} \textbf{A}\$\$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	PH 12: 24 OF STATE OF LORIDA
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING A Registration Division of O P. O. Box 63 Tallahassee,	Section Corporations 27	

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.

Statutes.			
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles Kairos Productions, Inc.	of Conve	rsion i	is:
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a corporation \$\frac{\psi_1400055074}{2000000000000000000000000000000000000			
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)			
First organized, formed or incorporated under the laws ofFlorida			
March 31, 2012 (Enter state, or if a non-U.S. entity, the n	ame of the c	ountry)	ı
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Article	les of Orga	aniza(ion:
Kairos Productions, LLC			
(Enter Name of Florida Limited Liability Company)			
4. If not effective on the date of filing, enter the effective date: July 1, 2014			
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the sate listed in the attached Articles of Organization, if an effective date is listed there	same as th	fter the e effe	ie ctive
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.		2014	وروز کا الا
	登場	2014 JUN 23	- Caracteria
Page 1 of 2	SE CONTRACTOR OF THE PROPERTY		
	1.00 1.00	PH 12:	To Topico
		رّ د:	

EFFECTIVE DATE 07/01/14

Signed this 17th day of Lune	20 <u>/ \.</u>	
Signature of Authorized Representative of Lin Signature of Authorized Representative:	alley Anith)
Printed Name: Ph / HR. 47 S. 70 R	Time.	ブト
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]	
Signature: Hathrynfruth Printed Name. KATHRYN SMITH	Title: Treasurer	-
Signature: Old S VIII Printed Name: CHARLES & SMITT	Title: PRESIDENT	<u>-</u> -
Signature: Printed Name:	Title:	<u>-</u> -
Signature:Printed Name:	Title:	<u>-</u>
Signature:Printed Name:	Title:	_ _
Signature: Printed Name:	Title:	- -
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an I		
If Florida General Partnership or Limited Liabi Signature of one General Partner.	lity Partnership:	
If Florida Limited Partnership or Limited Liabil Signatures of <u>ALL</u> General Partners.	lity Limited Partnership:	
All others: Signature of an authorized person.		201
Fees:		THE SHAPE OF THE S
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	123 PHI2: ARY OF STA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compan	y is:	
. /		
Kairos Produc (Must end with the words "Limited	ctions ILC	
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ADTICLE II A II		
ARTICLE II - Address: The mailing address and street address of the street address of th	he principal office of the Limited Liability	Company is:
The maning address and street address of the	he principal office of the Elinked Elability	Company is.
Principal Office Address:	Mailing Address:	
203 Buena Vista Te	803 Russellists	774
803 Buena Vista DR. Eustis, FL 32726	803 Buena Vista 7 Eustis, FL 32726	<u>∟</u> R.
		_
		_
ARTICLE III - Registered Agent, Regist		
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Registered Agent. You must designate an individual or a	nother
The name and the Florida street address of	the registered egent eres	
,	5 5	
Kathryn 6	z. Smj4h	
7	Vame	
0	11. / -	
	a Utsta De	
	(P.O. Box <u>NOT</u> acceptable)	
Eustis	FL 32726-6405 Zip	
City	Zip	
	and to accept service of process for the above	
	ed in this certificate, I hereby accept the app	
<u> </u>	apacity. I further agree to comply with the p lete performance of my duties, and I am fam	•
	is registered agent as provided for in Chapte	
accept the obligations of my position a	s registered agent as provided for in Chapte	2
1h.	. 0 6	
Kathery	no Ameda)	
Registered Agent's	Signature (REQUIRED)	23
2 00	i i	***
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(CON	TINUED)	PH IZ:
	***·	

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager ALAMBL CHALLES E SM/TH- 203 B LENS VISTON EUSTIS, FL 32726-64	TR = 6405
"AMBR" = Authorized Member "MGR" = Manager LHALLES E SM/TH- 203 B HONA VISTA EUSTIS, FL 32726 KATHEYN G SMITH 803 BLIAND VISTA D	TR = 6405
MANUEL AR/AMBE CHARLES E SMITH 803 BURNA VISTA EUSTIS, FL 32726 MILLE AC/AMBE KATHEUN & SMITH 803 BURNA VISTA D	TR = 6405
- ALAMBE KATHEYN & SMITH 803 BLEND VISTO D	TR = 6405
- ANIMBR KATHEYN & SMITH 803 BLEND VISTO D	TR = 6405
- AND ARJAMBE KATHEYN & SMITH 803 BLEND VISTO D	<u></u>
ANGE AK/AMBL KATHEYN & SMITH 803 BLEND VISTO D	e 05
803 Blena Vista D	05
EUSTIS, FL 32726-64	<u> </u>

(Use attachment if necessary)	
CLE V: Effective date, if other than the date of filing: July 1, 2014. (OP	
CLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Kararyn 6 Smith	
Signature of a member or an authorized representative of a member	ber.
Signature of a member or an apthorized representative of a member and accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this de	ocument
Signature of a member or an anthorized representative of a member and accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this deposition and affirmation under the penalties of perjury that the facts stated herein are	cument true.
Signature of a member or an anthorized representative of a member	ocument true. tate
Signature of a member or an apthorized representative of a member or an apthorized representative of a member or an apthorized representative of a member of a member of a member of statutes an affirmation under the penalties of perjury that the facts stated herein are am aware that any false information submitted in a document to the Department of S constitutes a third degree felony as provided for in s.817.155, F.S.)	true.
Signature of a member or an apthorized representative of a member or an apthorized representative of a member or an apthorized representative of a member of a member of a member of statutes an affirmation under the penalties of perjury that the facts stated herein are am aware that any false information submitted in a document to the Department of S constitutes a third degree felony as provided for in s.817.155, F.S.)	true.
Signature of a member or an authorized representative of a member	true.
Signature of a member or an apthorized representative of a member of statutes, the execution of this defensitutes an affirmation under the penalties of perjury that the facts stated herein are am aware that any false information submitted in a document to the Department of Sonstitutes a third degree felony as provided for in s.817.155, F.S.) **EATHEN G. SMITH** Typed or printed name of signce	comment true. 2014 JUN 23
Signature of a member or an anthorized representative of a member of statutes an affirmation under the penalties of perjury that the facts stated herein are am aware that any false information submitted in a document to the Department of Sonstitutes a third degree felony as provided for in s.817.155, F.S.) **ATHLYN G. SMTH** Typed or printed name of signce Filing Fees:	comment true. 2014 JUN 23
Signature of a member or an arthorized representative of a member of statutes, the execution of this definition and are the penalties of perjury that the facts stated herein are am aware that any false information submitted in a document to the Department of Sonstitutes a third degree felony as provided for in s.817.155, F.S.) **ATRAN G. SMITH** Typed or printed name of signee **Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation	comment true. 2014 JUN 23
Signature of a member or an anthorized representative of a member of statutes an affirmation under the penalties of perjury that the facts stated herein are am aware that any false information submitted in a document to the Department of Sonstitutes a third degree felony as provided for in s.817.155, F.S.) **ATHLYN G. SMTH** Typed or printed name of signce Filing Fees:	comment true. 2014 JUN 23
Signature of a member or an apthorized representative of a member of a member of an apthorized representative of a member of an apthorized representative of a member of a member of statutes, the execution of this do notitutes an affirmation under the penalties of perjury that the facts stated herein are am aware that any false information submitted in a document to the Department of Sonstitutes a third degree felony as provided for in s.817.155, F.S.) **Example G. Smrth** Typed or printed name of signce **Filing Fees:** \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**	comment true. 2014 JUN 23

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

ARTICLE IV-