L14000 167494

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

Office Use Only



100264886261

10/06/14--01031--021 **137.50

10/28/14--01015--002 **17.50

14 OCT 27 AMII: 25
SECRETARY OF STATE

OCT 2 8 2014 T. HAMPTON

. COVER LETTER

3

TO: Registration's Division of C			
	•	7 Mount et -	110
SUBJECT:	(Name o	of Paculting Florida Limite	d Company)
	(Name (of Resulting Florida Elinia	a company)
			d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:	
	(Contact Person)		
	(Contact Person)		
	Ple J Hank (Firm/Company)	cting LC	•
	(Firm/Company)	J	
	fatt St Sort		
Tan	MPG FL 32 City, State and Zip Code)	3606	
(City, State and Zip Code)		
	n (a) teamtai	upa.com	
E-mail Address: (to b	be used for future annual rep	port notifications)	
For further informati	on concerning this ma	tter, please call:	
Jim	Friele.	at (813)	247-1999
(Name of Conta	act Person)	(Area Code) (Day	vtime Telephone Number)
Enclosed is a check	for the following amou	nt:	
\$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 ADDRES	S:	MAILING A	ADDRESS:
Registration Section		Registration	
Division of Corporat	tions	Division of C	
Clifton Building		P. O. Box 63	21

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301



Dividion of Corp

October 10, 2014

TRIPLE J MARKETING LLC 301 W PLATT ST STE 302 TAMPA, FL 33606

SUBJECT: TRIPLE J MARKETING, LLC

Ref. Number: W14000062007

We have received your document for TRIPLE J MARKETING, LLC and check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$17.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Only non-United States entities may become a domestic limited liability company at stated in section 605.1052, Florida Statutes. You may want to explore one of the conversion options. Please return to our website sunbiz.org to download the appropriate form.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Tammy Hampton Regulatory Specialist III

Letter Number: 114A00021749

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Triple Medical Medical Modern Modern
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on 5/30/03 (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) connect be prior to date of receipt on filed date nor more than 20 days of the the
(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; <u>AND</u> 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 all applicable statutes.

Page 1 of 2

TALLAHASSEE, FLORIDA

Signed this day of Cotober	_20_14	
Signature of Authorized Representative of Lim		
Signature of Authorized Representative: Printed Name: 5.m Fc.:1e	Title: CEO	
Signature(s) on behalf of Other Rusiness Entity:	[See below for required signature(s)	.]
Signature: Printed Name: John Coil	_ Title: C F O	<u> </u>
Signature: Printed Name:		
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 If Directors or Officers have not been selected, an In		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabili 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)	SECRETARY TALLAHASSE

Page 2 of 2

n, •••	
,	ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
	ARTICLE I - Name: The name of the Limited Liability Company is:
	Must end with the words "Limited Liability Company, "L.L.C.," or "L.L.C.")
	ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
	Principal Office Address: Mailing Address:
	301 West Platt St Svite 302 Tampa FL 33600 Tampa FL 33600
	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:
	J.m Fa.1e Name
	Name
	301 West Platt St Suite 302
	Florida street address (P.O. Box NOT acceptable)
	Tampa FL 33606 City Zip
	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
	Registered Agent's Signature (REQUIRED)
	(CONTINUED)
	Page 1 of 2

ARTICLE IV-	authorized to manage and control the Limited Liebilites
Company:	authorized to manage and control the Limited Liability
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Im Faile
	301 West Platt ST S/16 302 Tampa, FL 33606
_ CFo	John Coil
	301 West Platt St Juite 302 Tampa FL 33606
(Use attachment if necessary)	
FICLE V: Effective date, if other than the	date of filing: (OPTIONAL)
FICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.)	date of filing: (OPTIONAL) De specific and cannot be more than five business days p
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