

L14000180456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

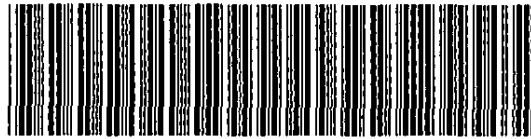
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000264881970

RECEIVED
DEPARTMENT OF STATE
14 NOV 10 AM 10:45

FILED
14 NOV 10 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 21 2014

T. HAMPTON

444-68167



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : I20000000195

REFERENCE : 316044 7922976

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 250.00

ORDER DATE : September 26, 2014

ORDER TIME : 10:10 AM

ORDER NO. : 316044-010

CUSTOMER NO: 7922976

DOMESTIC AMENDMENT FILING

NAME: ACENTERPRIZES, LLC

EFFECTIVE DATE:

XX CERTIFICATE OF CONVERSION
WITH ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER'S INITIALS: _____



RECEIVED
DEPARTMENT OF STATE
14 NOV 18 PM 1:51

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 12, 2014

CSC
EMILY GRAY
TALLAHASSEE, FL

RESUBMIT

Please give original
submission date as file date.

SUBJECT: ACENTERPRIZES, LLC
Ref. Number: W14000068167

We have received your document for ACENTERPRIZES, LLC and the authorization to debit your account in the amount of \$150.00. However, the document has not been filed and is being returned for the following:

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.

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: 014A00024049



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 19, 2014

CSC
EMILY GRAY
TALLAHASSEE, FL

SUBJECT: ACENTERPRIZES, LLC
Ref. Number: W14000068167

RESUBMIT
Please give original
submission date as file date.

We have received your document for ACENTERPRIZES, LLC and the authorization to debit your account in the amount of \$150.00. However, the document has not been filed and is being returned for the following:

You must submit the Articles of Organization along with the Certificate of Conversion.

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: 014A00024538

RECEIVED
DIVISION OF CORPORATIONS
2014 NOV 20 14 2:06
NOT RECORDED
SUFFICIENT FOR FILING

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:
ACENTERPRIZES, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Limited Liability Company.
(Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of California
on 02/01/2013 (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**:
ACENTERPRIZES, 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
14 NOV 10 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


Signed this 31ST day of OCTOBER 20 14.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: 

Printed Name: Anthony Edwards Title: Member

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

Signature: 

Printed Name: Anthony Edwards Title: President

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
14 NOV 10 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ACENTERPRIZES, 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:

21129 NORTH WEST 14TH PLACE, #258
MIAMI GARDENS, FL 33169

Mailing Address:

21129 NORTH WEST 14TH PLACE, #258
MIAMI GARDENS, FL 33169

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:

Corporation Service Company

Name

1201 Hays Street

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

Tallahassee

City

FL 32301

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..

Courtney Williams
Asst. Vice President



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
14 NOV 10 AM 9:42
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

AMBR

Name and Address:

ANTHONY C. EDWARDS

PO BOX 695352

MIAMI, FL 33269

(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:

 10/31/2014

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.)

Anthony C. Edwards

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)

Page 2 of 2

FILED
14 NOV 10 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA