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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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14 DEC -2 PH 1: 42

DEC 02 2014
J. HARRIS

### **COVER LETTER**

Division of Corporations
SUBJECT: DAKY, INC.
SUBJECT:
The enclosed Articles 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:
Edward E. Wollman (Contact Person)
Wollman, Gehrke 4. Soloman, P.A. (Firm/Company)
2235 Vonetion Court Swik 5
Noples, FL 34/09-8728 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (259 ) 435 - 1533 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$150.00 Filing Fees and Certificate of Status  \$180.00 Filing Fees and Certified Copy  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

INHS11 (02/14)



October 15, 2014

EDWARD E WOLLMAN 2235 VENETION COURT, SUITE 5 NAPLES, FL 34109-8728

SUBJECT: DAKAY LLC

Ref. Number: W14000062927

We have received your document for DAKAY LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 414A00022114

SECRETARY OF STATE
DIVISION OF CRAPORATIONS

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# **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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
DAKY, TNC. 2910185  (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on Acoust 26, 1965 (date of organization, formation or incorporation) (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:
DAKY 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 all applicable statutes.

Page 1 of 2

Signed this ZO day of November	_20 <u>_19</u>
Signature of Authorized Representative of Limite	ed Liability Company:
Signature of Authorized Representative: Dele Printed Name: Dele E. Chlumsky, SR	1. Uhlumsky St. Title: President
Signature(s) on behalf of Other Business Entity: [S	
Signature: Dale E. Ulumsky. Se.  Printed Name: Dale E. Chlumsky	
Printed Name: Dole E Chlumsky	Title: Resident
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or O If Directors or Officers have not been selected, an Inco	
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	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)

Page 2 of 2

SECRE FART OF STATION DIVISION OF CHAPTER THAT

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
DAKY LLC		<del>_</del>
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability	Company is:
Principal Office Address:	Mailing Address:	
DAKY LLC 1199 Third Street South Naples, FL 84102	DAKY LLC 1199 Third Street South Naples, FL 34/02	- -
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signs red Agent. You must designate an individual or a	iture: mother
The name and the Florida street address of the re	gistered agent are:	
Dale E. Chlum Name	T South	
Florida street address (P.O.  NAPLES  City	•	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete paccept the obligations of my position as regions.	accept service of process for the abov this certificate, I hereby accept the ap ty. I further agree to comply with the erformance of my duties, and I am fan	pointment as provisions of all niliar with and
Registered Agent's Signa	ature (MEQUIRED)	DIVIS 14 D
(CONTINU	U <b>ED</b> )	ECHA TAR SION OF C
Page 1 of	2	PH I: L

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

"MGR" = Manager  MGR    197 Third Street South   Naples   F. 34162	"AMRD" - Authorized Member			
Company   Comp		Г		
More Michaels D. Chlumky SS 71 Hoborage Door Fork Myes, FL 3899  (Use attachment if necessary)  FICLE V: Effective date, if other than the date of filing:		Dale F Chlynsky SD		
More Michaels D. Chlumky SS 71 Hoborage Door Fork Myes, FL 3899  (Use attachment if necessary)  FICLE V: Effective date, if other than the date of filing:		1199 Third Street South	<del></del>	
(Use attachment if necessary)  (Use attachment if necessary)  (ICLE V: Effective date, if other than the date of filing:		Naples, FL 34102		
(Use attachment if necessary)  ICLE V: Effective date, if other than the date of filing:	MC-O	Alta La Salaka		
(Use attachment if necessary)  ICLE V: Effective date, if other than the date of filing:		5541 Hachana Down		
ICLE V: Effective date, if other than the date of filing:		Fort Myes, FL 33908		
REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  (In accordance with section 605.0203 (1) (b), Florida Statules, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)  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)				
ICLE V: Effective date, if other than the date of filing:	-			
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ICLE V: Effective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be more than five business days preceded and safter the date of filing.)  ICLE 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 Stanties, 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.)  Dale E. Chlunsky  Typed or printed name of signee  Filling Fees:  \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)				
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