

L14000184666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

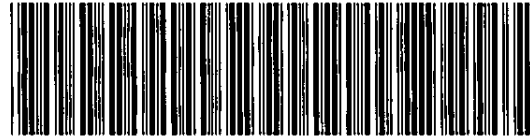
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900265718459

10/24/14--01010--004 **128.75

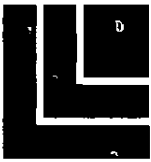
11/12/14--01034--005 **21.25

FILED
14 DEC -3 AM 9:21
SECRETARY OF STATE
TALLAHASSEE FL 32304

M. MILLIGAN
EXAMINER

DEC - 3 2014

W14-65883



LAMBERT LANZA, CPAs, P.A.

Certified Public Accountants
Financial Services

October 30, 2014

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Capital Conceptz, LLC
Document Number W14000065383
Rejected Filing

Dear Service Representative:

Our client has previously filed the incorrect forms to domesticate a Delaware Limited Liability Company into a Florida Limited Liability Company and received the rejected filing notice.

We have attached the correct forms with an additional \$21.25. Please accept these forms and payment, in addition to our previous payment of \$128.75, to complete the registration process.

Sincerely,

Lambert Lanza, CPAs, PA

Patrick G. Lanza, CPA

Attachment: Cover Letter, Articles of Conversion, Articles of Organization
Copy of previously sent check
C: Capital Conceptz, LLC

RECEIVED
14 NOV - 7 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Patrick G. Lanza, CPA Financial Advisor

*Securities offered through HD Vest Investment Services, Member: SIPC

*Advisory services offered through HD Vest Advisory Services

Lambert Lanza, CPAs, P.A. is not a registered broker/dealer or independent investment advisory firm

PO Box 11123 • 3700 Creighton Road, Ste. 1 • Pensacola, Florida 32524



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 19, 2014

CAPITAL CONCEPTZ, LLC
8036 EASTWOOD LN
PENSACOLA, FL 32514

SUBJECT: CAPITAL CONCEPTZ, LLC
Ref. Number: W14000065383

We have received your document for CAPITAL CONCEPTZ, 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.

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

Letter Number: 514A00024599

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAPITAL CONCEPTZ, LLC

(Name of Resulting Florida Limited Company)

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:

LEO D. LYNNE, JR.

(Contact Person)

CAPITAL CONCEPTZ, LLC

(Firm/Company)

8036 EASTWOOD LANE

(Address)

PENSACOLA, FL 32514

(City, State and Zip Code)

LEO@EXECUTIVESCAPES.COM

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

LEO D. LYNNE, JR.

at (949)

515-2112

(Name of Contact Person)

(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)

☐ \$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 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

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

14 DEC -3 AM 9:21
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:
CAPITAL CONCEPTZ, 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 **the State of Delaware**

on **December 8, 2008**

(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**:
CAPITAL CONCEPTZ, 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.

Signed this 30 day of October 20 14.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]
Printed Name: Leo Lynne Title: 10/30/14

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

Signature: [Signature]
Printed Name: Leo Lynne Title: 10/30/14

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 DEC -3 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CAPITAL CONCEPTZ, 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:

8036 EASTWOOD LANE
PENSACOLA, FL 32514

Mailing Address:

8036 EASTWOOD LANE
PENSACOLA, FL 32514

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:

Leo Lynne

Name

8036 EASTWOOD LANE

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

PENSACOLA

City

FL 32514

Zip

FILED
14 DEC -3 AM 9:21
TALLAHASSEE, FL 0909

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)

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:

LEO LYNNE

8036 EASTWOOD LANE

PENSACOLA, FL 32514

FILED
DEC-3
NOV 9 21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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:



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.)

Leo Lynne

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)