# L15000620041

(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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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: LightBox Ventures, 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:
ARTHUR FORT (Contact Person) LIGHT BOX Ventures, LLC
(Firm/Company)
4139 SAHantic Are 13801
(Address)  New Smyrna Beach, FL 32169  (City, State and Zip Code).  GETARIE @ gmail. com  E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at ((() (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & \$155.00 Filing Fees and Certificate of Status    \$185.00 Filing Fees and Certified Copy    \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:  Registration Section  Division of Corporations  Clifton Building  P. O. Boy 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

# **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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on 6 4 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:
LIGHTBOX Ventures, 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 22 day of Tanuary	20_15	
Signature of Authorized Representative of Limi	ited Liability Company:	
Signature of Authorized Representative: APPRINTED FOR	Title: Dwner Presider	+
Signature(s) on behalf of Other Business Entity:		
Signature: APPHAR FOR  Printed Name: APPHAR FOR	Title: Owner   President	
Signature:		
Signature: Printed Name:	Title:	
Signature: Printed Name:		
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 of the Directors or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		15 - 18:00
Fees:		JAN 26 ALLARY ALLARY
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	6 PK 3:5

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE 1 - Name:** 

The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
(Musi cia marine words Emma Emoring Company, E.S.C., or ESC.)
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address:  Mailing Address:
4139 SATIONAL AVE 4139 SATIONAL AVE APT 13801 New Syngra Beach, FL32169 New Syngra Beach, FL 32169
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:
APTHUR FORT Name
Name
4139 S Atlantic AVE Apt B801
Florida street address (P.O. Box NOT acceptable)
New Smyrna Beach, 32169
New Snyrna BeachFL 32169  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)
Page 1 of 2

Company:	
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	ARTHUR FORT 4129 S'Atlantic Le Apt 13801 New Smyrna Beach, FL 32169
	•
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(Use attachment if necessary)	
n effective date is listed, the date must 90 days after the date of filing.)  FICLE VI: Other provisions, if any.	st be specific and cannot be more than five business days p
REQUIRED SIGNATURE:	POLIC FOR 55 5
(In accordance with section 605.0203 constitutes an affirmation under the pe	ber or an authorized representative of a member.  (1) (b), Florida Statutes, the execution of this document enalties of perjury that the facts stated herein are frue.  submitted in a document to the Department of State ovided for in s.817.155, F.S.)
A	PIHUR FORT SIS
1	Typed or printed name of signee

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

**ARTICLE IV-**

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)