

L15000056507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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15 MAR 27 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 31 2015

T. HAMPTON

for SH

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: One Team Christian Academy, 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:

Kim Stanfield

(Contact Person)

The Hogan Law Firm

(Firm/Company)

20 So. Broad Street

(Address)

Brooksville, FL 34601

(City, State and Zip Code)

kstanfield@hoganlawfirm.com

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

For further information concerning this matter, please call:

Kim Stanfield

(Name of Contact Person)

at (352) 799-8423

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 4, 2015

KIM STANFIELD
THE HOGAN LAW FIRM
20 S BROAD ST
BROOKSVILLE, FL 34601

SUBJECT: ONE TEAM CHRISTIAN ACADEMY, LLC
Ref. Number: W15000015701

We have received your document for ONE TEAM CHRISTIAN ACADEMY, 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):

The Florida Statutes prohibits a Florida non-profit corporation from being a party in a conversion. A Florida non-profit corporation may be a party in a merger; however, the Florida non-profit corporation must be the surviving entity.

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: 715A00004500

15 MAR 27 AM 10:00
DIVISION OF CORPORATIONS
INFORMATION SERVICES

PREPARED BY AND RETURN TO:

DEBORAH HOGAN, ESQ.
THE HOGAN LAW FIRM
20 SOUTH BROAD STREET
P.O. BOX 485
BROOKSVILLE, FLORIDA 34605-0485
(352) 799-8423

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

ASSIGNMENT OF NAME "ONE TEAM CHRISTIAN ACADEMY"

WHEREAS, immediately after inception, the principals of One Team Christian Academy, Inc. determined that it was in its best interest to conduct its educational endeavors as a "for-profit" entity instead of pursuing a non-profit status under the laws of the State of Florida or the Federal Tax Code. Therefore the Corporation resolved to assign the Name, "One Team Christian Academy" to a Florida limited liability company to be formed and to effect its dissolution on the records of the Secretary of State, Division of Corporations, State of Florida.

NOW THEREFORE, KNOW ALL MEN BY THESE PRESENTS: that ONE TEAM CHRISTIAN ACADEMY, INC., a voluntarily dissolved Florida nonprofit corporation, Document Number N15000000658 ("Assignor"), in consideration of the sum of Ten and 00/100 Dollars (\$10.00) and other good and valuable consideration in hand paid to it by ONE TEAM CHRISTIAN ACADEMY, LLC, a Florida Limited Liability Company, ("Assignee"), the receipt and adequacy whereof is hereby acknowledged, sells, conveys, assigns, transfers, sets over and delivers and by these presents does hereby sell, convey, assign, transfer and set over unto the Assignee:

the Name "ONE TEAM CHRISTIAN ACADEMY"
for all uses and purposes including but not limited to the use of the name for that certain limited liability company with State of Florida Document (confirmation) Number W15000015701

TO HAVE AND TO HOLD the Name unto the said Assignee, its successors and assigns forever.

Assignor acknowledges that, pursuant to FLS 617.1404, Articles of Dissolution may be revoked at any time prior to 120 days from the date of filing. Assignor represents and warrants that it will not revoke the Articles of Dissolution filed on March 12, 2015.

IN WITNESS WHEREOF, Assignor has caused this instrument to be executed effective the 12th day of March, 2015.

Kim Stanfield
Witness Signature

Print Name: _____

Dixie Richards
Witness Signature

Print Name: **Dixie Richards**

ASSIGNOR:

ONE TEAM CHRISTIAN ACADEMY, INC

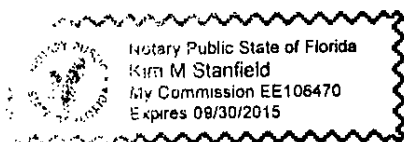
Tammy S. Manners
Signature

By: TAMMY S. MANNERS
It's President

STATE OF FLORIDA)
COUNTY OF HERNANDO)

The foregoing Assignment of Name "One Team Christian Academy, Inc." and Consent was acknowledged before me this 25th day of March, 2015, by **TAMMY S. MANNERS**, in her capacity as President of **One Team Christian Academy, Inc.**, who is personally known to me or has produced _____ as identification and did not take an oath. He executed the foregoing instrument, and acknowledged the same to be his free and voluntary act and deed, for the uses and purposes therein mentioned

(Seal)



Kim Stanfield
Notary Public
My Commission Expires: 9/30/2015

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

One Team Christian Academy, 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:

21011 VIOLET ROAD
BROOKSVILLE, FL 34601

Mailing Address:

21011 VIOLET ROAD
BROOKSVILLE, FL 34601

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:

THE HOGAN LAW FIRM, LLC

Name

20 SO. BROAD STREET

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

BROOKSVILLE

City

FL 34601

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)

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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

MGR

Name and Address:

TAMMY S. MANNERS

21011 VIOLET ROAD

BROOKSVILLE, FL 34601

MGR

JAMES M. MANNERS

21011 VIOLET ROAD

BROOKSVILLE, FL 34601

MGR

PAMELA S. WILFONG

21033 VIOLET ROAD

BROOKSVILLE, FL 34601

(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:

Tammy S. Manners

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.)

TAMMY S. MANNERS, Manager

Typed or printed name of signer

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)

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TALLAHASSEE, FLORIDA