2007658

(Re	questor's Name)	
(Ad	idress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		İ

Office Use Only



500270253815

03/05/15--01016--022 **185.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 24, 2015

DAN VARGHESE / EXCANCE, INC. 5004 E. FOWLER AVE SUITE C #121 TAMPA, FL 33617 US

SUBJECT: EXCANCE, INC. Ref. Number: P14000003336

We have received your document for EXCANCE, INC. and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

The Certificate of Conversion must be signed by an authorized person.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 515A00005788

COVER LETTER

SUBJECT: Excand	ce, Inc. conversion to	Excance, LLC	•	
		of Resulting Florida		d Company)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:		
Dan Varghese				
	(Contact Person)		•	
Excance Inc.				
	(Firm/Company)			
5004 EAST FOW	ER AVENUE, SUIT	E C, #121		
	(Address)		•	
TAMPA, FL 33617				
((City, State and Zip Code)		•	
danvarghese@gm	ail.com			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
Dan Varghese		_at (813	389	-0072
(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)
Enclosed is a check f	or the following amou	nt:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAIL	ING A	ADDRESS:
Registration Section		Registr		
Division of Corporat	ions			orporations
Clifton Building		P. O. B	ox 632	27

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO: Registration Section Division of Corporations

Dear Carolyn,

Please see herewith the forms signed at the places I missed for the conversion of Excance, Inc. to Excance, LLC. I have completed the Annual Report filing for Excance Inc. on April 27th, and the receipt number is 3641013459.

Thank you,

Dan Varghese

813-389-0072

Articles of Conversion

For

"Other Business Entity"

Into

FILE V SECRETARY OF STATE DIVISION OF CORPORATION

15 APR 24 AM II: 36

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" Exc.	immediately prior to the : ance, Inc.	filing of the Articles of Conversion is:
	f Other Business Entity)	
2. The "Other Business Entity" is a(Enter ent	Corporation	P14000003334
	ity type. Example: corporation law or l	
First organized, formed or incorporated under	er the laws of	Florida
on(date of organization, formation or incorporation	(C.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a non-U.S. entity, the name of the country)
3. The name of the Florida Limited Liability	y Company as set forth in	the attached Articles of Organization:
Excar	ice LLC	
(Enter Name of Florida	Limited Liability Company)	•
4. If not effective on the date of filing, enter (The effective date: 1) cannot be prior to date this document is filed by the Florida date listed in the attached Articles of Organization.	date of receipt or filed d Department of State; <u>AN</u>	ate nor more than 90 days after the ND 2) must be the same as the effective
5. The plan of conversion has been approved	l in accordance with all ar	onlicable statutes

Page 1 of 2

Signed this 2nd day of March	20 <u>15</u>	
Signature of Authorized Representative of Lim		SECTION OF STATE DIVISION OF CORPORATIONS
Signature of Authorized Representative? Printed Name: Dan Varghese		15 APR 24 AH 11: 36
Signature(s)-on-behalf-of-Other-Business-Entity:		
Signature: DAN AND HESE	Mile: PRESIDENT	
Signature:Printed Name:	Tisla	
Signature:Printed Name:	Title:	
Signature:		
Printed Name:		
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title.	
	11tte:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer. corporator must sign.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty 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)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Excance, 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 print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5004 EAST FOWLER AVENUE SUITE C, #121	5004 EAST FOWLER AVENUE SUITE C, #121
TAMPA, FL 33617	TAMPA, FL 33617
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
Dan Varghese	15 A
Name	A SECTION
5344 Outlook Way	24 27 28 29 29 29 29 29 29 29 29 29 29 29 29 29

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..

FL 33541

Zip

Registered Agent's Signature (REOLIRED)

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

City

Zephyrhills

(CONTINUED)

Page 1 of 2

		authorized to manage and conti		ORPU
Title: "AMBR" = Author "MGR" = Manager		Name and Address:	15 APR 24	AM I
President	_	Dan Varghese		
		5004 EAST FOWLER A		
:		SUITE C, #121, TAMPA	, FL 33617	
	-			
	-			
	-			
(Use attachment if the CLE V: Effective date is listed.	te, if other than the	date of filing:	. (OPTIO	NAL)
CLE V: Effective da effective date is liste 00 days after the date	te, if other than the d, the date must le of filing.)	date of filing:be specific and cannot be more	(OPTION e than five busines	NAL)
CLE V: Effective da effective date is liste 00 days after the date	te, if other than the d, the date must le of filing.)	date of filing:be specific and cannot be more	(OPTIO) e than five busines	NAL;
CLE V: Effective da effective date is liste 00 days after the date	te, if other than the ed, the date must le of filing.)	date of filing:be specific and cannot be more	(OPTION	NAL;
CLE V: Effective da effective date is liste 00 days after the date CLE VI: Other provide	te, if other than the ed, the date must le of filing.)	date of filing:be specific and cannot be more	(OPTIO) e than five busines	NAL)
CLE V: Effective da effective date is liste 00 days after the date CLE VI: Other provi-	te, if other than the ed, the date must be of filing.) sions, if any.	be specific and cannot be more	ive of a member.	ss da
CLE V: Effective da effective date is liste 00 days after the date CLE VI: Other provi- REQUIRED SIGN Signa In accordance with se	te, if other than the ed, the date must be of filing.) sions, if any. NATURE: ture of a member ection 605.0203 (1	or an authorized representate (b), Florida Statutes, the execution	ive of a member.	ent
CLE V: Effective da effective date is liste 0 days after the date CLE VI: Other provi- REQUIRED SIGN Signa In accordance with so onstitutes an affirmat am aware that any fa	NATURE: Nature of a member ection 605.0203 (1 ion under the penalse information sul	or an authorized representate) (b), Florida Statutes, the executives of perjury that the facts state bmitted in a document to the De	ive of a member. ution of this docum	ss da
CLE V: Effective da effective date is liste 0 days after the date CLE VI: Other provi- REQUIRED SIGN Signa In accordance with so onstitutes an affirmat am aware that any fa	NATURE: Nature of a member ection 605.0203 (1 ion under the penalse information sul	or an authorized representate (b), Florida Statutes, the executives of perjury that the facts states	ive of a member. ution of this docum	ent

Page 2 of 2

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