(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:



700276828587

09/08/15--01027--013 **155.00

M15-62031

Office Use Only

COVER LETTER

Division of Corporations			
SUBJECT: Scott's Craf	ts, LLC		
(Name	of Resulting Florida Limite	d Company)	
The enclosed Articles of Conversion, Articles Entity" into a "Florida Limited L			
Please return all correspondence concernin	ng this matter to:		
•			
James L. Brewer		A Section 1	
Scatt's Caffsull		•	
(Firm/Company)	,		
120 Wattord St. (Address)			
Umatilla, FL 32784		,	
(City, State and Zip Code) Cotts Conference E-mail Address: (to be used for future annual re			٠
For further information concerning this ma	itter, please call:		
James L Brewer (Name of Contact Person)	_at (<u>302</u>) <u>S0</u> (Area Code) '(Day	Mime Telephone Number)	·
Enclosed is a check for the following amou	ınt:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and- Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations	MAILING A Registration (Division of C	Section	•
Clifton Building 2661 Executive Center Circle	P. O. Box 63	27	
ZOOT EXECUTIVE CETTEL CITCLE	Tallahassee,	CL J4314	

Tallahassee, FL 32301



September 18, 2015

JAMES L. BREWER 120 WAFFORD ST. UMATILLA, FL 32784

SUBJECT: SCOTT'S CRAFTS, LLC Ref. Number: W15000062031

We have received your document for SCOTT'S CRAFTS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The signature of an authorized person is required.

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return the corrected original and one copy of 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) 245-6052.

Letter Number: 115A00019742

Maryanne Dickey Regulatory Specialist II New Filing Section

www.sunbiz.org

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	.,
(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.)	en e
First organized, formed or incorporated under the laws of <u>Delaware</u>	
on $\frac{2/4/201}{(\text{date of organization, formation or incorporation})}$ (Enter state, or if a non-U.S. entity, the nar	me of the country) where the country is a fine of the country is a fine
3. The name of the Florida Limited Liability Company as set forth in the attached Article	s of Organization:
Scott's Crafts, U.C.	and the second second
(Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date:	en e
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 9 date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the sa date listed in the attached Articles of Organization, if an effective date is listed therein	me as the effective
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	ll not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statutes.	
	* 5 * * * * * * * * * * * * * * * * * *

Signed this 24 day of August	_20	
Signature of Authorized Representative of Limit	ited Liability Company:	
	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Signature of Authorized Representative: James	tronger	
Printed Name: James L Brewet	Title: OWTO	· 6
Signature(s) on behalf of Other Business Entity:		in the same
Signatures Tames 1 B Mossi	and the second second	The state of the s
		(1) 海州 量(1)(1)
Printed Name: Janes L. B. L. B. L. B.	Title: MGRM/Bure	5 C
Signature:		
Signature: Printed Name:	Title:	
		·
Signature:Printed Name:	Title:	
Printed Name.	riue	
Signature:		
Printed Name:	Title:	•
Signature:		
Printed Name:	Title:	,
	**	
Signature:		
Printed Name:	Title:	. '
If Florida Corporation:	- m	Pys
Signature of Chairman, Vice Chairman, Director, or		
If Directors or Officers have not been selected, an In	corporator must sign,	
If Florida General Partnership or Limited Liabili	to Danta anchine	
Signature of one General Partner.	ty i at mersup.	
•		
If Florida Limited Partnership or Limited Liabili	·	, H
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)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:					
Scott's Crafts, LLC	,				2 '
(Must end with the words "Limited Liabili	ty Company,	L.L.C.," or "LLC	.")		جِب
ARTICLE II - Address: The mailing address and street address of the pri	incipal off	ice of the Lin	nited Liabi	lity Compa	ny is:
Principal Office Address:	Mailing	Address:			
Lan Wafford St Umatilla, Pl 32784	120 Un	Wafford afillan	15t. 732	784	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & ered Agent. Y	Registered ou must designate	Agent's S	gnature: l or another	
The name and the Florida street address of the re	egistered a	gent are:			
James LBrew	er_	· 4	(i j _e d	Maria de Cara	
Name 120 Wa Ford S	5/	All and the second		kon ya Kalendari Manazaria	er e
Florida street address (P.O.	. Box <u>NO</u> T	[acceptable]	1,5		n, ţ
Umatilla	·. FL	32784	177.		; ••• •*
City		Zip	- · :	w., 27.	, ,
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p accept the obligations of my position as res	this certifi ity. I furth performand	cate, I hereby er agree to co ee of my dutie.	accept the mply with s, and I am	appointme the provision familiar w	nt as ns of all ith and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

·				ţ
<u> Title:</u>		Name and Address:		-
"AMBR" = Authorize	ed Member	· · · · · · · · · · · · · · · · · · ·	<u>.</u> ~	7
"MGR" = Manager				ب
MOKA		James LEREWE		. 0
		120 Wattord S	X	
		umatilla, Fl	32784	•
	SPACE AND ART	, , ,		
				-
	and the same		<u> </u>	-
				•
		v		
	P .			•
	**			•
**	\$ 3.54. ₆	type and the state of		•
		<u>a de la companya de </u>	<u>, is the first of the second </u>	_
			, · · · · · · · · · · · · · · · · · · ·	
(Use attachment if ne	cessary)	W/J-V	Yele	•
days after the date o	cessary) if other than the da the date must be filing.) ock does not meet the a	specific and cannot be mon	•	ss d
LE V: Effective date, fective date is listed, days after the date of the date inserted in this bloom in the date of the date inserted in this bloom in the date inserted in the date.	cessary) if other than the da the date must be filing.) ock does not meet the a epartment of State's rec	specific and cannot be mon	ré than five busine	ss c
LE V: Effective date, fective date is listed, days after the date of the date inserted in this ble's effective date on the Desire date.	cessary) if other than the da the date must be filing.) ock does not meet the a epartment of State's rec	specific and cannot be mon	ré than five busine	\$8 (
LE V: Effective date, fective date is listed, days after the date of the date inserted in this ble's effective date on the Desire of the date on the Desire date.	cessary) if other than the da the date must be filing.) ock does not meet the a epartment of State's rec	specific and cannot be mon	ré than five busine	\$8 (
LE V: Effective date, fective date is listed, days after the date on the date on the Description on the Description of the Desc	cessary) if other than the da the date must be filing.) ock does not meet the a epartment of State's rec	specific and cannot be mon	ré than five busine	\$8 (
LE V: Effective date, fective date is listed, days after the date of the date inserted in this blocks effective date on the Double VI: Other provision	cessary) if other than the da the date must be filing.) ock does not meet the a epartment of State's recons, if any.	specific and cannot be mon	ré than five busine	ss c
LE V: Effective date, fective date is listed, days after the date on the date on the Description on the Description of the Desc	cessary) if other than the da the date must be filing.) ock does not meet the a epartment of State's recons, if any.	specific and cannot be mon	ré than five busine	\$8 (
LE V: Effective date, fective date is listed, days after the date of the date inserted in this blows effective date on the Donate VI: Other provision	cessary) if other than the da the date must be filing.) ock does not meet the a epartment of State's recons, if any.	specific and cannot be mon	ré than five busine	\$8 (

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)

Page 2 of 2