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(Rec	questor's Name)	
(Add	lress)	
(Ada	Iress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
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(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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COVER LETTER

то:	Registration S Division of C				
SUBJ	ECT: Big Mout	h Finance LLC			
		(Name	of Resulting Florida	Limite	d Company)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corre	espondence concernin	g this matter to:		
David	Hammer				
		(Contact Person)			
Big M	outh Finance LLC				
		(Firm/Company)			
4830 V	W. Kennedy Blvd.,	Suite 600			
		(Address)			
Tampa	ı, FL 33609				
	(0	City, State and Zip Code)			
dhamr	ner@hammerbiz.c	om			
E-r	nail Address: (to b	e used for future annual re	port notifications)		
For fi	rther information	on concerning this ma	tter, please call:		
David	Hammer		_at (579-5	128
	(Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
Enclo	sed is a check f	or the following amou	ınt:		
(\$25 fo & \$12:	0.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Regis Divis Clifte 2661	EET ADDRESS tration Section ion of Corporation Building Executive Centuressee, FL 3230	ions er Circle	Registra Division P. O. Bo	ntion S n of C ox 632	orporations

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 of Conversion is: Big Mouth Finance Corp.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation
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 Florida
July 31, 2014 (Enter state, or it 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:
Big Mouth Finance 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) assert the primary date of received an filed date now more than 20 days after the
(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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

Signed this day of December		
Signature of Authorized Representative of Limi		
Signature of Authorized Representative:	WO JIMMUS	
Printed Name: David E. Hammer	Title: Manager	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]	
Signature: Swind Hammw		
Signature: David E. Hammer	Title: President	
Signature:	: :	5.
Printed Name:	Title:	ري ام ام
	-	
Signature:Printed Name:	Tide	
Printed Name:	Title:	-
Signature:		
Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation:	orr	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc		
If Directors of Officers have not been selected, an in-	corporator must sign.	
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.		
Signature of all 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)	

ARTICLE I - Name: The name of the Limited Liability Company is: Big Mouth Finance 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: Mailing Address: 4830 W. Kennedy Blvd. Suite 600 Tampa, FL 33609 Tampa, FL 33609 Tampa, FL 33609

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

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:

David E. Hammer	<u>.</u> .
Nan	ne
4830 W. Kennedy Blvd., Ste. 6	00
Florida street address (P.6	O. Box NOT acceptable)
Tampa	FL 33609
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)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:	্ৰ প্ৰ
"AMBR" = Authorized Member	TWING WILL TRUMP USS	3 3
"MGR" = Manager		
MGR — Manager	David E. Hammer	$\hat{\mathbb{R}}$
Mok	4830 W. Kennedy Blvd., Ste. 600	
	Tampa, FL 33609	N
	Tampa, TE 33007	# No. 10 Per 10
(Use attachment if necessary) LE V: Effective date, if other than fective date is listed, the date mu	the date of filing:	(OPTIONA
CLE V: Effective date, if other than effective date is listed, the date multiple days after the date of filing.)	eet the applicable statutory filing requirements, t	n five business
CLE V: Effective date, if other than ffective date is listed, the date multiple date after the date of filing.) the date inserted in this block does not multiple date on the Department of States.	eet the applicable statutory filing requirements, t	n five business
LE V: Effective date, if other than ffective date is listed, the date multiple days after the date of filing.) the date inserted in this block does not mult's effective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE:	eet the applicable statutory filing requirements, tate's records.	n five business
LE V: Effective date, if other than ffective date is listed, the date multiple days after the date of filing.) the date inserted in this block does not mult's effective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mem This document is executed if am aware that any false information.	eet the applicable statutory filing requirements, t	n five business this date will not be of a member. rida Statutes.

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent