116000018797

(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: 2/11/14 Paul Kollesh gawl
Derminion to correct
permission to correct Ant Vregarding effectives attendantee.
Ant Vregarding effectively date and little.

Office Use Only



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16 JAN 14 PM 1: 18

SCURE JARY OF STATE
DIVISION OF CORPORATIONS

JAN 1 4 2016 S. PRATHER



January 28, 2016

PAUL KOKESH 915 DOYLE RD STE 303-151 DELTONA, FL 32725

SUBJECT: EXOTIC CHOPPERS LLC

Ref. Number: W16000006304

We have received your document for EXOTIC CHOPPERS 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 effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 14, 2016. Please amend your document accordingly.

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) 245-6900.

Stacy Prather Regulatory Specialist III

Letter Number: 416A00001969

COVER LETTER

TO: Registration Section Division of Corpora			
SUBJECT: EXO		HOPPERS of Resulting Florida Limite	
	(Name C	or Resulting Florida Limite	u Company)
		-	d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all correspond	ence concerning	g this matter to:	·
PAUL (Continue Continue Contin	014ES1	1	
(Con	tact Person)	•	
(Firm	(Company)		
915 Doyle b	Ed. ste	: 303-15/	
. (1	Address)		
Deltona F		25	
(City, Sta	ite and Zip Code)		
PAUL@E	Kuticch	oppers, con	1
E-mail Address: (to be used for	or future annual rep	port notifications)	
For further information con	cerning this mat	ter, please call:	
PAULICO KE	ES 14	at (407) Z	531233
(Name of Contact Perso			time Telephone Number)
Enclosed is a check for the	following amou	nt:	
	5.00 Filing Fees ertificate of	\$180.00 Filing Fees and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:		MAILING A	DDRESS:
Registration Section		Registration S	
Division of Corporations Division of Corporations		orporations	
Clifton Building		P. O. Box 632	
2661 Executive Center Circ Tallahassee, FL 32301	le	Tallahassee, I	FL 32314

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:
Exotic Choppers Inc., 904-49495 (Enter Name of Other Business Entity)
1
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 (Enter state or if a par U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on (Enter state, or 11 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:
Exotic Choppers LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 1/1/16 (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 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

16 JAN 14	DIVISION OF CORPORATIONS
PH	CORFORA
: 8	SHOLL

Signed this 12 day of January	_20 <u>16</u>				
Signature of Authorized Representative of Limited Liability Company:					
Signature of Authorized Representative: Printed Name: PAUL 1615	Title: President				
Signature(s) on behalf of Other Business Entity:					
Signature: Printed Name: PALL KOLLES 14	Title: Pragiolist				
Signature:Printed Name:					
Signature:Printed Name:					
Signature:					
Printed Name:	Title:				
Signature:Printed Name:	Title:				
Signature:					
Printed Name:					
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.					
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:				
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.					
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

The name of the Limited Liability (Company is:
Exotic	hoppers LLC
(Must end with the words	"Limited Liability Company. "L.L.C" or "LLC.")
ARTICLE II - Address:	
The mailing address and street addr	ess of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
, ,	. –

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:

ARTICLE I - Name:

PAUL KOKESH

Name

2574 Enterprise Osteen Rd.

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

Osteen FL 32764

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager	PAUL KOKESH 2574 Enterprise Oste Osteen FL 32725	<u>=</u>	fd.
		<u>-</u>	
			,
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be seen as the seen are the seen			•
to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the a	pplicable statutory filing requirements, this date will t		
document's effective date on the Department of State's rec	oras.	16	DIVID
ARTICLE VI: Other provisions, if any.		MAL	Sign
		F	
		2	
REQUIRED SIGNATURE:		••	SIA
	Molar	8	SHOL
This document is executed in accord	an authorized representative of a member dance with section 605.0203 (1) (b), Florida Statutes. In submitted in a document to the Department of State rovided for in s.817.155, F.S.	r.	
PAUL	ICOIGES (4 or printed name of signee		
Typed		-	
\$125 00 Filing Fee for Articles of O	Filing Fees rganization and Designation of Registered	Age	nt .

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

ARTICLE IV-

Company:

Page 2 of 2

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)