L16000087333

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bi	usiness Entity Nan	ne)
(Do	ocument Number)	,
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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V5-10-15

COVER LETTER

TO: Registration Division of O			
		1. b. T.	
SUBJECT:	(Name	4以たら ユンC. of Resulting Florida Limite	d Company)
			d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all cor	respondence concernin	g this matter to:	
ANTHONY	Contact Person) (Ks Iwc. (Firm/Company) HAE. North. (Address)		
Franks Fran	(Firm/Company)		
6140 947	HAJE. WONTH. (Address)	100-2-	
PinEllas Part	City, State and Zip Code)	32	
FRANKS Franks	(City, State and Zip Code) 2001	OH.	
E-mail Address: (to	be used for future annual re	port notifications)	
For further informat	ion concerning this ma	tter, please call:	
ANTHONY ROSE (Name of Con	act Person)	at (727) 4/a (Area Code) (Day	188-7282. Vime Telephone Number)
Enclosed is a check	for the following amou	int:	
\$\\$\\$150.00 \text{ Filing Fees} (\\$25 \text{ for Conversion} \& \\$125 \text{ for Articles} \text{ 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		MAILING A	
Registration Section Division of Corpora		Registration S Division of C	
Clifton Building		P. O. Box 63	27 [°]
2661 Executive Cen	iter Circle	Tallahassee,	FL 32314

Tallahassee, FL 32301,



March 29, 2016

ANTHONY ROSAMOND 6140 94TH AVE NORTH PINELLAS PARK, FL 33782

SUBJECT: FRANKS FRANKS LLC Ref. Number: W16000023133

We have received your document for FRANKS FRANKS 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):

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.

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) 245-6052.

Tim Burch Regulatory Specialist II

www.sunbiz.org

Letter Number: 516A00006411



April 13, 2016

ANTHONY ROSAMOND 6140 94TH AVE NORTH PINELLAS PARK, FL 33782

SUBJECT: FRANKS FRANKS LLC Ref. Number: W16000023133

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

You failed to make the correction(s) requested in our previous letter.

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.

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) 245-6052.

Tim Burch Regulatory Specialist II

Letter Number: 216A00007652

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.

F. J. F. J. T.		114012	ion is:
Franks Franks INC.	25.00	16	
(Enter Name of Other Business Entity)	<u> </u>	Ξ€	1.1
•			•
2. The "Other Business Entity" is a		1	engamental Engamental
(Enter entity type. Example: corporation, limited partnership,		9	Ž.
general partnership, common law or business trust, etc.)	ر در او در در او در ا		9 4
First organized, formed or incorporated under the laws ofFlacida.		**************************************	
(Enter state, or if a non-U.S. entity, the n	ame of t	he cou	intry)
on <u>8-24-1999</u>			• •
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Articl	les of C)rgar	nization:
		_	
Franks Franks LLC (Enter Name of Florida Limited Liability Company)		_	
Franks Franks LLC	same a: in.)	s the	effective

Page 1 of 2

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 13 day of Monh	_20 <u>16·</u>	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: Printed Name: ANTHON ROSANON &	Title: MANAger	_
Signature(s) on-behalf of Other Business Entity:	See below for required signature(s)	
Signature: Arthon Rosamurel Printed Name: Arthony Rosamurel	Title: President	_
Signature:Printed Name:	_ Title:	-
Signature:		_
Signature:Printed Name:		
Signature:		
Signature: Printed Name: Signature: Printed Name:	Title:	- <u>E</u>
Signature:		
Printed Name:	Title:	- 0
Signature:		- PAR
Signature: Printed Name: If Florida Corporation:	Title:	TE COLO
		S. T.
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		
	_	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit 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

Letter of the second of the second

ARTICLE I - Name:

E	Cantos Franks LL	c	
(Must		bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Add The mailing address		principal office of the Limited Lia	ibility Company is:
Principal Office Ad	dress:	Mailing Address:	
6140 94TH AV PiNEIlas Pank,	VE. NORTH.	6140 94TH AVE. NOX Pincilas Pank, FL. 337	7H·
PiNEIIas Fank,	FC 33781	Pinellas Pank, FC. 337	<u>82.</u>
ARTICLE III - Reg	gistered Agent, Register	ed Office, & Registered Agent's gistered Agent. You must designate an individ	Signature:
ARTICLE III - Reg (The Limited Liability Com- business entity with an act	gistered Agent, Register	ed Office, & Registered Agent's gistered Agent. You must designate an individ	Signature:
ARTICLE III - Reg (The Limited Liability Com- business entity with an act	gistered Agent, Register upany cannot serve as its own Regive Florida registration.) orida street address of the	ed Office, & Registered Agent's gistered Agent. You must designate an individe registered agent are:	Signature:
ARTICLE III - Reg (The Limited Liability Com- business entity with an act	gistered Agent, Register upany cannot serve as its own Regive Florida registration.) orida street address of the	ed Office, & Registered Agent's gistered Agent. You must designate an individ	Signature: lual or another
ARTICLE III - Reg (The Limited Liability Combusiness entity with an act The name and the Flo	gistered Agent, Register upany cannot serve as its own Register live Florida registration.) orida street address of the Arthory Rosa Nat	ed Office, & Registered Agent's gistered Agent. You must designate an individe registered agent are:	Signature: lual or another
ARTICLE III - Reg (The Limited Liability Combusiness entity with an act The name and the Flo	ristered Agent, Register upany cannot serve as its own Register ive Florida registration.) orida street address of the ANTHONY RUSA Nat	ed Office, & Registered Agent's gistered Agent. You must designate an individe registered agent are:	Signature: lual or another
ARTICLE III - Reg (The Limited Liability Combusiness entity with an act The name and the Flo	ristered Agent, Register upany cannot serve as its own Register ive Florida registration.) orida street address of the ANTHONY RUSA Nat	ed Office, & Registered Agent's gistered Agent. You must designate an individe registered agent are:	Signature: lual or another

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..

liability company at the place designated in this certificate, I hereby accept the appointment as

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

(Use attachment if necessary) CLE V: Effective date, if other than the date of filing: 3-28-20/6. (OPTIONAL) effective date is listed, the date must be specific and cannot be more than five business day: 0 days after the date of filing.) 1 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed in the date on the Department of State's records.	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing: 3-28-20/6. (OPTIONAL) effective date is listed, the date must be specific and cannot be more than five business day 0 days after the date of filing.) f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records. CLE VI: Other provisions, if any. Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605 0203 (1) (b), Florida Statutes. 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 x.817.155, F.S. Authory Research Typed or printed name of signee Filling Fees		•	
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The name and address of each person authorized to manage and control the Limited Liability