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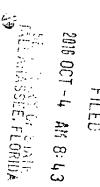
(Re	questor's Name)	<u>. </u>
(Ada	dress)	
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(Cit	y/State/Zip/Phono	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration S Division of Co				
SUBJECT: BANDI	T DOG LLC			
	(Name	of Resulting Florida I	Jimited	d Company)
		-		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
Stratton Smith, Esq.				
	(Contact Person)	<u> </u>		
Stratton Law Firm				
	(Firm/Company)			
609 W. Azcele Street				
	(Address)			
Tampa, Florida				
	City, State and Zip Code)			
stratton@strattonlaw.con	•			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further information	on concerning this ma	-		
Stratton Smith		_at (<u>813</u>)	251-1	624
(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)
Enclosed is a check f	or the following amou	nnt:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)		□\$180.00 Filing F and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:			ADDRESS:
Registration Section	•	Registra		
Division of Corporat Clifton Building	ions	Divisior P. O. Bo		Corporations 27
2661 Executive Cent	er Circle			FL 32314

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED

2016 OCT -4 AM 8: 43

SELECTIALLY OF STATE
TALLAHASSEE, FLORIDA

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.

version is:
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rganization:
s after the the effective

Page 1 of 2

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

igned this 197 day of Sept	20 16	
Signature of Authorized Representative of Limi	ted Liability Company:	FILED
Signature of Authorized Representative: Printed Name: Robert Tatro	I III vianagei	CT -4 AM 8:43
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	HASSEE, FLORIDA
Signature:		
Printed Name: Robert Tatro	Title: President	
Signature:		
Signature:Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabili Signature of one General Partner. If Florida Limited Partnership or Limited Liabili	corporator must sign. ty Partnership:	
Signatures of <u>ALL</u> General Partners.	<u></u>	
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:		
Bandit Dog LLC (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
1316 W. Bearss Ave. Tampa, Florida 33613	same	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)		
The name and the Florida street address of the re	egistered agent are:	
April Tatro		
Name		
1316 W. Bearss Ave	D. NOT.	
Florida street address (P.O.	Box NOT acceptable)	
Tampa	FL 33606	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg	this certificate, I hereby acce ty. I further agree to comply erformance of my duties, and	ept the appointment as with the provisions of all I I am familiar with and
Registered Agent's Sign	ature (REQUIRED)	2016 OCT
(CONTINUE Page 1 of		FILED 1-4 AM 8: SSEE FLORI

Robert Tatro 1316 W. Bearss Ave. Tampa, Florida 33613 April Tatro 1316 W. Bearss Ave. Tampa, Florida 33613	- - -
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an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes. submitted in a document to the Department of State	

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)

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

\$ 5.00 Certificate of Status (Optional)