L1700033900

(Re	equestor's Name)	.
(Ad	ldress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:]

Office Use Only

FEB 1 5 2017

T. SCOTT



700295534207

01/17/17--01041--024 **150.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2017

DAVID HORNE 500 110TH AVE N APT 1215 ST PETERSBURG, FL 33716

SUBJECT: CAPTAIN DAVE'S PIRATE DAWGS LLC

Ref. Number: W17000004609

We have received your document for CAPTAIN DAVE'S PIRATE DAWGS 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):

Name on line 3 of conversion and name in article 1 not matching.,

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.

Tyrone Scott Regulatory Specialist II

Letter Number: 017A00001212

www.sunbiz.org

you have any questions Please Call @ 828-424-4782

COVER LETTER

_		orporations	_			
SUBJECT: _		Captain	Dave's	Trading &		E Company LLC
		(N	ame of Res	ulting Florida Lim	ited Comp	any)
				_		fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return	all corre	espondence o	oncerning:	g this matter to:		
)avid	Horne (Contact Per				
		(Contact Per	rson)		•	
<u> </u>	stavi	(Firm/Comp	any)		onp	any LLC
500 H	Oth 1	Ave N	Apt 1215	5	····	
		(Address	s) [*]			
Si_	Perter?	Sbr73 FL City, State and 2	3371 Zip Code)	ا ا	_	
Captain de	ess: (to b	ading co (a	e annual rei	port notifications)	·	
				tter, please call:		
Das	id H	かんぐん	•	at (825	, 4	24-4782
(Name	of Conta	ict Person)		(Area Code	(Dayti	me Telephone Number)
	check f	or the follow	ing amou	nt: (All checks		d by this office must be payable in US
\$150.00 Filin (\$25 for Convers & \$125 for Artic of Organization)	ion les	□S155.00 Fi and Certificat Status		□\$180.00 Filin and Certified Co	ру	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET AD	DRES	S:		MAII	ING AI	DDRESS:
Registration S				_	tration Se	
Division of Co		ions				rporations
Clifton Buildi		o			Box 6327	
2661 Executiv	∕e Cent	er Circle		Tallah	assee FI	3731A

Tallahassee, FL 32301

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of North Carolina
on S 19 14 (Enter state, or if 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:
Captain Daves Trading Company L.C. (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (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.
CONTROL CONTROL OF THE CONTROL OF TH

- 5. The plan of conversion has been approved in accordance with all applicable statutes.
- 6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this day of day.	_20 <u>/7</u>
Signature of Authorized Representative of Limi	•
Signature of Authorized Representative:	_ Title:pain
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Jan R. Horne Printed Name: Tara R. Horne	
Printed Name: Tara R Horre	Title: purher
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	
Signature	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
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:	
Captain Davis B	rading Company LLC ity Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liabili	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10671 Gnif Blud Unit 852 Trainer Island, Fi 33706	10671 Grif Blod Unit 852 Treasure Island Fi 33706
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the r	egistered agent are:
David Lito	YNE.
David Litto	2
500 110th Ave N	J Avet 1215
500 110-12 Ave A Florida street address (P.O.	Box NOT acceptable)
St. Petersburz	F1 33716
St. Petersburg City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as tity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S

(CONTINUED)

Page 1 of 2

e: IBR" = Authorized Member IR" = Manager Am B R Amar	Name and Address: David L Hoine 500 110th Ave N Aptizes St. Reteabling . FL 33716
GR" = Manager Am B R	David L Home 500 110th Ave N Apt 1265 St. Peterbargo, FL 33716
Am B R	David L Home 500 110th Ave N Apt 1215 St. Retectors & FL 33716
Mar	500 110th Ave N Apt 1265 St. Peterbargo FL 33716
mar	St. Peterslange, FL 33716
M-3R	
<u> </u>	Tara R Home.
	8 Strangery Line
	Tara R Horne 8 Strangery Line Weaverville, NC 28787

····	· · · · · · · · · · · · · · · · · · ·
	
	specific and cannot be more than five business
s after the date of filing.) the inserted in this block does not meet the appetitive date on the Department of State's recover. T: Other provisions, if any.	pplicable statutory filing requirements, this date will not be
ate inserted in this block does not meet the ap- ective date on the Department of State's reco	pplicable statutory filing requirements, this date will not be
ate inserted in this block does not meet the appetitive date on the Department of State's recovery. Other provisions, if any. DUIRED SIGNATURE:	pplicable statutory filing requirements, this date will not be ords.
ate inserted in this block does not meet the appetitive date on the Department of State's recovery. VI: Other provisions, if any.	pplicable statutory filing requirements, this date will not be ords.
DUIRED SIGNATURE: Signature of a member or This document is executed in accord I am aware that any false information	an authorized representative of a member. lance with section 605.0203 (1) (b), Florida Statutes. Is submitted in a document to the Department of State
DUIRED SIGNATURE: Signature of a member or This document is executed in accord I am aware that any false information constitutes a third degree felony as pr	an authorized representative of a member. lance with section 605.0203 (1) (b), Florida Statutes. Is submitted in a document to the Department of State