L1700052929

(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:

Office Use Only

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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2017

JOSHUA O. DORSEY 10181-C SIX MILE CYPRESS PKWY FORT MYERS, FL 33966

SUBJECT: ISLAND DESIGN'S EMBROIDERY OUTLET, LLC

Ref. Number: W17000011011

We have received your document for ISLAND DESIGN'S EMBROIDERY OUTLET, 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.

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: 017A00002468

COVER LETTER

Division of Corporations		
SUBJECT: Island Design's Embroidery Outlet, LI	LC	
(Name of Resu	lting Florida Limite	d Company)
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lia"		on, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	this matter to:	
Joshua O. Dorcey		
(Contact Person)		
The Dorcey Law Firm, PLC		
(Firm/Company)		
10181-C Six Mile Cypress Pkwy		
(Address)		
Fort Myers, Florida 33966		
(City, State and Zip Code)		
josh@dorceylaw.com		
E-mail Address: (to be used for future annual repo	ort notifications)	
For further information concerning this matt	ter, please call:	
Joshua O. Dorcey	at (²³⁹	(Daytime Telephone Number)
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amour dollars and drawn on a bank located in the U		rocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$180.00 Filing and Certified Cop	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Registra Division P. O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, 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" Island Design's Embroidery Outlet, Inc.	immediately prior to the filing of the Articles of Conversion is:
	of Other Business Entity)
2. The "Other Business Entity" is a Corporat	·
(Enter en	tity type. Example: corporation, limited partnership, al partnership, common law or business trust, etc.)
First organized, formed or incorporated und	er the laws of
November 22, 1999	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation	1)
3. The name of the Florida Limited Liabilit	sy Company as set forth in the attached Articles of Organization:
Island Design's Embroidery Outlets, LLC	
(Enter Name of Florida	a Limited Liability Company)
4. If not effective on the date of filing, ente	er the effective date:
	date of receipt or filed date nor more than 90 days after the
date listed in the attached Articles of Org	Department of State; <u>AND</u> 2) must be the same as the effective ganization, if an effective date is listed therein.) et the applicable statutory filing requirements, this date will not be listed as the e's records.
5. The plan of conversion has been approve	ed 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 18th day of Allucy	2017
Signature of Authorized Representative of Limi	0 / /
Signature of Authorized Representative: House Printed Name: Robert S. Emerson	Title: Manager
Signature(s) on behalf of Other Business Entity: [
Signature: West Semenson Printed Name: Robert S. Emerson	Till Devile
Printed Name: Robert S. Emerson	Title: President
Signature Are M. Emerson Printed Name: Javed M. Emerson	Tisto, Vice President
Signature:Printed Name:	Title
Signature: Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:	
Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y 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

ARTICLE I - Name:	
The name of the Limited Liability Com	pany is:
Island Design's Embroidery Outlet, LLC	
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
14501 McCormick Drive	14501 McCormick Drive
Tampa, Florida 33626	Tampa, Florida 33626
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:
DLF Registered Agent	Service, LLC
	Name
10181-C Six Mile Cypr Florida street addre	ess Pkwy ess (P.O. Box <u>NOT</u> acceptable)
Fort Myore	23066

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)

City

(CONTINUED)

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<u>Γitle:</u>	Name and Address:
AMBR" = Authorized Member	•
MGR" = Manager	
MGR	Robert S. Emerson
	14501 McCormick Drive
	Tampa, Florida 33626
MGR	Joyce M. Emerson
	14501 McCormick Drive
	Tampa, Florida 33626
LE V: Effective date, if other th	nan the date of filing: (OPTIONA must be specific and cannot be more than five business d
fective date is listed, the date days after the date of filing.)	must be specific and cannot be more than five business of the meet the applicable statutory filing requirements, this date will not be f State's records.
LE V: Effective date, if other the fective date is listed, the date days after the date of filing.) the date inserted in this block does not 's effective date on the Department of LE VI: Other provisions, if any. REQUIRED SIGNATURE:	must be specific and cannot be more than five business of the meet the applicable statutory filing requirements, this date will not be f State's records.
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The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

Page 2 of 2

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)