## L17000185416

(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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## COVER LETTER

TO: New Filing Son Division of C				
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SUBJECT: INGAGE	CREATIVE LLC	sulting Florida Limite	rd Con	anauri)
	(Name of Kes	autting Piorida Lithic	eu Con	ipany)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
BLAKE KERR				
	(Contact Person)			
B. A. KERR FINANCIA	L PLLC			
	(Firm/Company)			
1360 FRETZ DR. STE 2				
	(Address)			
EDMOND, OK 73003				
	City, State and Zip Code)	<del></del>		
CAUSTIN@BAKERRF	•			
E-mail Address: (to b	e used for future annual re	port notifications)		
Can fromban in Comment	an agranumina this man	ttom interess salls		
	on concerning this ma	•		
BLAKE KERR		at (	) <u>509-6</u>	
(Name of Conta	et Person)	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the		rocess	sed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Copy		☐S185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILI	NG A	ADDRESS:
New Filing Section		New Fil		
Division of Corporat	ions			corporations
Clifton Building		P. O. Bo	ox 63.	27

Tallahassee, FL 32314

32301

2661 Executive Center

Circle Tallahassee, FL

## 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.

(Entra Ni	· · · · · · · · · · · · · · · · · · ·
(Enter 18)	ame of Other Business Entity)
2. The "Other Business Entity" is a $\frac{LL}{L}$	C
	er entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated on FEBRUARY 18, 2010 (date of organization, formation or incorporate)	(Enter state, or if a non-U.S. entity, the name of the country)
3. The name of the Florida Limited Lia	ability Company as set forth in the attached Articles of Organization:
INGAGE CREATIVE LLC	
(Enter Name of F	orida Limited Liability Company)
(The effective date: 1) cannot be prid	or to date of receipt or filed date nor more than 90 calendar days
after the date this document is filed be the effective date listed in the attache	or to date of receipt or filed date nor more than 90 calendar days by the Florida Department of State; AND 2) must be the same as d Articles of Organization, if an effective date is listed therein.) t meet the applicable statutory filing requirements, this date will not be listed as the f State's records.
after the date this document is filed he the effective date listed in the attache Note: If the date inserted in this block does no document's effective date on the Department of	by the Florida Department of State; AND 2) must be the same as d Articles of Organization, if an effective date is listed therein.) t meet the applicable statutory filing requirements, this date will not be listed as the
after the date this document is filed by the effective date listed in the attached Note: If the date inserted in this block does not document's effective date on the Department of 5. The plan of conversion has been apple.  6. The "Converted or Other Business End	by the Florida Department of State; AND 2) must be the same as and Articles of Organization, if an effective date is listed therein.) to meet the applicable statutory filing requirements, this date will not be listed as the f State's records.

Signed this 3 day of MAY	20_17
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Printed Name: JOE P. HUGHES III	Title: PRESIDENT
Signature(s) on behalf of Other Business Entity:	
(Signature) Ove PNA	<b>→</b> 711_
Signature: JOE P. HUGHES III	Title: PRESIDENT
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	Title
Timed (vanc.	
If Florida Corporation:	o.w
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
	, <u>-</u>
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
inglatures of ALL Central Valuers.	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Certified Copy: Certificate of Status:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	ny is:
INGAGE CREATIVE LLC	
(Must contain the words "Limited I	Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1952 LAZY OAKS LOOP	1952 LAZY LOOP
ST. CLOUD, FL 34771	ST. CLOUD, FL 34771
	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another
The name and the Florida street address o	f the registered agent are:
JOE P. HUGHES III	

Name

1952 LAZY LOOP

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

ST. CLOUD

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))

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

<u>Title:</u>	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager	IOE B THIOTICS III			
PRESIDENT	JOE P. HUGHES III 1952 LAZY OAKS LOOP			
	ST. CLOUD, FL 34771			
	01/00000//1021/11			
<del></del>				
	and a			
	<u> </u>			
If an effective date is listed, the date mi prior to or 90 calendar days after the dat	et the applicable statutory filing requirements, this date will not be listed as the			
ARTICLE VI: Other provisions, if any.				
This document is executed in I am aware that any false info	ber or an authorized representative of a member.) In accordance with section 605.0203 (1) (b), Florida Statutes. In accordance with section 605.0203 (1) (b) provided Statutes. In accordance with section 605.0203 (1) (b), Florida Statutes. In accordance with section 605.0203 (1) (b)			
JOE P. HUGHES III				

Filing Fees

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)