W17000195103

(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



500302866655

08/25/17--01013--008 **150.00

AUG 3 0 2017 T SCHROEDER August 30, 2017

Florida Secretary of State

Via Facsimile: 850-245-6804

919.900.4720

Re: Magnate Corp, LLC

Our office represents Chrisy Tellis, who is a Member of Magnate Corp, LLC. Our office recently sent the documentation for this LLC to convert from a foreign entity to a domestic entity in the State of Florida. In your recent conversations with Ms. Tellis, this letter shall serve as confirmation regarding this entity filing in that Magnate Corp, LLC is being filed as a Florida Limited Liability Company, and not as a Corporation. This entity will be recognized and treated for all purposes as an LLC, versus any other form of legal entity.

If you have any additional questions, please feel free to contact our office. Thank you.

Sincerely,

ADAMS, HOWELL, SIZEMORE & LENFESTEY, PA

Michael Burger

Attorney

Enclosures

17 AUS 29 (1312) ng

www.ncplanning.com

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: MAGNATE CORP, LLC	
(Name	of Resulting Florida Limited Company)
	Articles of Organization, and fees are submitted to convert an "Other led Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence conce	erning this matter to:
CHRISY TELLIS	
(Contact Person)	
(Pinte/Company)	
140 Island Way, #190	
(Address)	
Clearwater Beach, FL 33767	
(City, State and Zip C	ode)
chrisytellis@bellsouth.net	
E-mail Address: (to be used for future anni	ual report notifications)
For further information concerning this	s matter, please call:
Chrisy Tellis	at (⁷²⁷) ⁴²⁴⁻⁶⁴⁹⁹
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following a dollars and drawn on a bank located in	amount: (All checks processed by this office must be payable in US the United States)
\$\footnote{\mathbb{K}}\$ \$150.00 Filing Fees (\$25-for Conversion & \$125 for Articles of Organization) \$\footnote{\mathbb{K}}\$ \$155.00 Filing Fees and Certificate of Stafus	ces
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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 Busin MAGNATE CORP, LLC	ness Entity" immediately prior to the filing of the Articles of Conversion is:
	Enter Name of Other Business Lauty)
2. The "Other Business Entity"	. LINITED LIABILITY COMPANY
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorp	porated under the laws of NORTH CAROLINA
11/17/11	(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 Limit MAGNATE CORP, LLC	ted Liability Company as set forth in the attached Articles of Organization
	me of Florida Limited Liability Company)
4. If not effective on the date of	filing, enter the effective date:
(The effective date: 1) cannot after the date this document is the effective date listed in the a	be prior to date of receipt or filed date nor more than 90 calendar days filed by the Florida Department of State; AND 2) must be the same as stached Articles of Organization, if an effective date is listed therein.) does not meet the applicable statutory filing requirements, this date will not be listed as the
5. The plan of conversion has be	en approved in accordance with all applicable statutes.
6. The "Converted or Other Busin	ess 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	20
Signature of Authorized Representative of Lin	uited Liability Company:
Signature of Authorized Representative: CHRISY TELLIS	Title: MEMBER
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Signature:	Title: MEMBER
Signature: Jaw Todo Printed Name: ASON BATTEN	Title: MEMBER
Signature: Printed Name:	Tial
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:	Till
Prinico Naine:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
If Norida General Partnership or Limited Liabili	ly Partnershin:
Signature of one General Partner.	er a magnetic group.
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ly Limited Partnership:
Signatures of ALL General Farmers.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

Mary Committee

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MAGNATE CORP, LLC	
(Must contain the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	s of the principal office of the Limited Liability Compa
Principal Office Address:	Mailing Address:
140 Island Way, #190	140 Island Way, #190
Clearwater Beach, FL 33767	Clearwater Beach, FL 33767

CHRISY TELLIS	
Na	ame
140 Island Way, #190	
Florida street address (P	O. Box NOT acceptable)
Clearwater Beach	FL_33767
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)

17 AUG 29 FITIZE 88

	Authorized Member	Name and Address:		
"MGR" = N	1anager	CIMICN TELL IO	•	
AMBR		CHRISY TELLIS 140 Island Way, #190		
		Clearwater Beech, FL 33767		
AMBR		JASON BATTEN		
AUTOR		140 Island Way, #190		
		Clearwater Beach, FL 33767		
·				
				
				
(Use attachn	nent if necessary)			
	ativa data ifatharthart	he date of filing:		
TICLE V. ES.			(OPTIC	NAL)
TICLE V: Effective date	cuve case, it outer man is	t he specific and council he man than	Stara busalis.	
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Typed or printed name of signee

constitutes a third degree felony as provided for in \$.817.155, F.S.

CHRISY TELLIS

Filing Fees

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