

L18000044261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

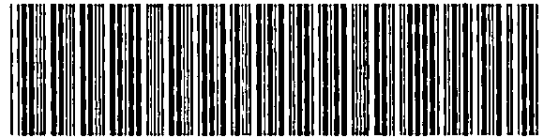
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000307942830

05/05/15--01018--004 **150.00

FILED
18 FEB 20 PM 4:40
CLERK OF STATE
TALLAHASSEE, FLORIDA

N CULLIGAN

FEB 20 2018

Ref: W15000033243

COVER LETTER

RECEIVED
2018 JAN 22 PM 2:53

TO: New Filing Section
Division of Corporations

SUBJECT: Mary Ann's School of Dance LLC
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Carolle Ryan

(Contact Person)

Liberte Accounting Service Inc

(Firm/Company)

P.O. Box 657

(Address)

New Port Richey FL 34656

(City, State and Zip Code)

Carolle.Ryan@LiberteWPR.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Carolle Ryan

(Name of Contact Person)

at (727) 842-8900

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☐ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☐ \$185.00 Filing Fees,
Certified Copy, and
Certificate of Status

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



February 16, 2018

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: W18000007199 and the attached New Filing application for Mary Ann's School of Dance, LLC

Request that the fees paid (\$150.00) for W18000007199 be applied to the new application.

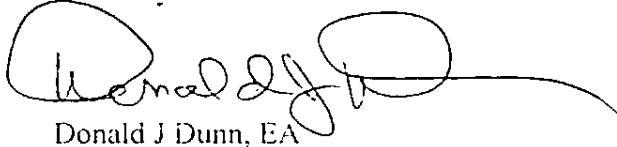
We have been trying to convert Mary Ann's School of Dance, Inc to Mary Ann's School of Dance, LLC for over a year.

When the payment is made to the new application, the remaining balance can be made to:

Mary Ann's School of Dance, LLLC
4007 Glessade Dr
New Port Richey, FL 34652

If there are any questions, please feel free to contact me at 727-842-8900.

Sincerely:



Donald J Dunn, EA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 24, 2018

LIBERTE ACCOUNTING SERVICE INC
PO BOX 699
NEW PORT RICHEY, FL 34656

SUBJECT: MARY ANN'S SCHOOL OF DANCE, LLC
Ref. Number: W18000007188

We have received your document for MARY ANN'S SCHOOL OF DANCE, 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):

The converting Florida entity must be active on our records.

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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 818A00001535

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MARY ANN'S SCHOOL OF DANCE, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4007 GLESSADE DR
NEW PORT RICHEY FL 34652

Mailing Address:

4007 GLESSADE DR
NEW PORT RICHEY FL 34652

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

CAROLLE RYAN

Name

5901 US HWY 19, STE 11B

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

NEW PORT RICHEY FL 34652

City

State

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)

(CONTINUED)

FILED
18 FEB 20 PM 4:40
CLERK OF DISTRICT COURT
TALAMON COUNTY, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MEMBER

Name and Address:

RAYMOND CATALDO

4007 GLISSADE DR

NEW PORT RICHEY, FL 34652

(Use attachment if necessary)

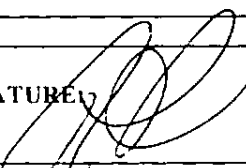
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s.817.155, F.S.

RAYMOND F CATALDO

Typed or printed name of signer

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)

FILED
18 FEB 20 PM 4:40
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE