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(R	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(C	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	

Office Use Only

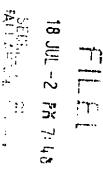
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COVER LETTER

TO:	New Filing Se Division of Co					
CIID	JECT: Togatown,	, LLC				_
SUD	JEC1	(Name of Res	ulting Florida Limi	ted Com	pany)	_
Busii	ness Entity" into	a "Florida Limited Lis	ability Company	on, and	d fees are submitted to coordance with s. 605.1	convert an "Other 045, F.S.
Pleas	se return all corre	espondence concerning	g this matter to:			
James	s K. Duerr, CPA					
		(Contact Person)		-		
Small	Business Resource	s USA, Inc.				हिंद क
		(Firm/Company)		-		
1601	Park Center Dr., Ste	e. 6A				
		(Address)		-		
Orlan	ndo, FL 32835	(18 JUL - 2 PM T
	((City, State and Zip Code)				
JimD	@sbrorlando.com					
E	-mail Address: (to b	e used for future annual re	port notifications)	_		
For f	further informati	on concerning this ma	tter, please call:			
Jame	s K. Duerr, CPA		_at (298-4		
	(Name of Conta	ict Person)	(Area Code	:) (Day	time Telephone Number)	
		for the following amou a bank located in the		process	sed by this office must	be payable in US
(\$25 & \$1	150.00 Filing Fees for Conversion 25 for Articles ganization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filin and Certified Co	-	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
New Divi Clift 266	REET ADDRES Filing Section ision of Corporat ton Building 1 Executive Cent ahassee, FL, 323	ions ter Circle	New I Divisi P. O.	Filing S on of C Box 63	Corporations	

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: Togatown, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
01/30/2015 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Togatown, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the date this document is filed by the Florida Department of State.) 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.
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 10	_ day of May	20 <u>18</u>
ou	rized Representative of Lin	nited Liability Company:
Signature of Muthor	Med Representation	Del
	zed Representative:	CG
Signature of Authori	Verstrate, for The Ateta Group, I	LC Title: MGR
Signature(s) on beha	olf of Other Business Entity	[See below for required signature(s)]
Signature:	- 47	
Printed Name: Andrew	Verstrate, for The Aress Group, I	LLC Title: MGR
	Y	
Signature:		mi. t
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature:		misi .
Printed Name:		Ittle:
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Printed Name:		Title:
Signature:	<u> </u>	Tist
Printed Name:		11UC
If Florida Corporat	don:	or Officer
Signature of Chairm	an, Vice Chairman, Director,	Incomparator must sign
If Directors or Office	ers have not been selected, an	meorphism must organ
	Danie suchin on Timited Tiol	hility Partnership:
It Florida General	Partnership or Limited Lial	Airel V == *********
Signature of one Ge	neral ratules.	
vermtJ_T ttk_J	Partnership or Limited Lia	bility Limited Partnership:
If Florida Limited	Coneral Partners	
Signatures of ALL	Tollofal Larmers.	
4 II - 4h acces		
All others:	orized person	
Signature of an auth	ntron hersom	
Fees:		
V TARA		
Articles of	Conversion:	\$25.00
	orida Articles of Organizatio	n: \$125.00
Certified C		\$30.00 (Optional)
Certificate		\$5.00 (Optional)
Certificate,	OT DAMPED.	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		18 JUL-2
Togatown, LLC (Must contain the words "Limited Liability	Company "LLC " or "LLC")	
(Must contain the words Limited Liability	Company, E.E.C., or EEC.	
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
310 K Street, Ste. 200	4250 Alafaya Trail, Ste. 212-207	
Anchorage, AK 99501	Oviedo, FL 32765	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re-	ered Agent. You must designate an individ	Signature: lual or another
Small Business Resources USA,		
Name		
Florida street address (P.O.	Box NOT acceptable)	
Orlando City	FL 32835 Zip	
3,		

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)

<u>'itle:</u>	Name and Address:	形5. 60
AMBR" = Authorized Member		
MGR" = Manager	The ATETA Group, LLC	The state of the s
MGR	310 K Street, Ste. 200	
	Anchorage, AK 99501	7 -7
•	Alleholage, AR 33301	
 		
·		
Use attachment if necessary)		
(Use attachment if necessary) LE V: Other provisions, if any.		
· ·		
· ·	2	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	Cof	
REQUIRED SIGNATURE: Signature of a member of	or an authorized representative of the with section 605.0203 (1) (b), Florida cument to the Department of State constitution	Statutes, I am aware
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant any false information submitted in a document as provided for in s.817.155, F.S. Andrew Verstrate, For The ATETA G.	nce with section 605.0203 (1) (b), Florida cument to the Department of State constitutions, LLC, MGR	Statutes, I am aware
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant any false information submitted in a document as provided for in s.817.155, F.S. Andrew Verstrate, For The ATETA G.	nce with section 605.0203 (1) (b), Florida cument to the Department of State constit	Statutes, I am aware

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

ARTICLE IV-