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(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:
Special instructions to Filing Officer.





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COVER LETTER

TO:	New Filing Se Division of Co						
SUB.	JECT: SNAPNA	MES 6, LLC					
5020			ulting Florida Limi	led Con	npany)		
					d fees are submitted to convecordance with s. 605.1045,		ther
Pleas	e return all corre	espondence concernin	g this matter to:				
NORN	MA C. WHEELER			_			
WEB.	COM GROUP, IN	(Contact Person) C.					
 _	<u> </u>	(Firm/Company)		-			
12808	GRAN BAY PAR	KWAY WEST					<,
		(Address)		-			ر د در تمر
JACK	SONVILLE, FL 32	2258				 O	-
	((City, State and Zip Code)		_		*1	المويد الموا
nwhee	eler@web.com			_		(0)	•
E-	mail Address: (to b	e used for future annual re	port notifications)			7A	
For fi	urther informati	on concerning this ma	tter, please call:				
NORI	MA WHEELER		_at (251-6	5558		
	(Name of Conta	ict Person)	(Area Code) (Day	ytime Telephone Number)		
		or the following amou a bank located in the		oroces	sed by this office must be pa	iyable in l	US
(\$25 f & \$12	50.00 Filing Fees for Conversion 5 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	□S180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
STR	EET ADDRES	S:	MAIL	ING A	ADDRESS:		
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Division of Corporations Division Clifton Building P. O. Be				Corporations			
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Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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" immediately prior to the filing of the Articles of Conversion is: SNAPNAMES 6, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on 2/6/2006 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: SNAPNAMES 6, 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 3RD day of DECEMBER	20_18'
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative:	Title: MANAGER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: MATTHEW P. MCCLURE	Title: SECRETARY
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title
Printed Name:	Titte:
Signature:	
Signature: Printed Name:	Title:
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.	corporator must sign.
Signature of one General Lamier.	
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

s:	
llity Company, "L.L.C.," or "LLC.")	
principal office of the Limited Liabil	lity Company is:
Mailing Address:	
SAME	
	
he registered agent are:	ignature: al or another
	•
(P.O. Box NOT acceptable)	
FL 32301 Zip	
and to accept service of process for the ted in this certificate, I hereby accept to comply with a plete performance of my duties, and I as registered agent as provided for in the Signature (REQUIRED)	n the provisions of all m familiar with and
	principal office of the Limited Liabil Mailing Address: SAME red Office, & Registered Agent's Segistered Agent. You must designate an individual the registered agent are: COMPANY ame P.O. Box NOT acceptable) FL 32301 Zip and to accept service of process for the red in this certificate, I hereby accept to apacity. I further agree to comply with lette performance of my duties, and I are registered agent as provided for in the complexity of the registered agent as provided for in the certificate as provided for in the complexity.

(CONTINUED)

ARTICLE IV-

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		
MGR	DAVID L. BROWN	
	12808 GRAN BAY PARKWAY WEST	
	JACKSONVILLE, FL 32258	
MGR	JENNIFER LADA	
	12808 GRAN BAY PARKWAY WEST	
	JACKSONVILLE, FL 32258	
MGR	MATTHEW P. MCCLURE	
	12808 GRAN BAY PARKWAY WEST	_
	JACKSONVILLE, FL 32258	_
		
(Use attachment if necessary)		ان ان ان ا
ICLE V: Other provisions, if any.		
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REQUIRED SIGNATURE:	, /
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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.

MATTHEW P.	MCCLURE
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Typed or printed name of signee

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)