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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

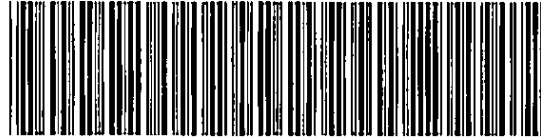
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W19- 6280

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: VISION ONE NATURALS, 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:

KEVIN A. KYLE, ESQ.

(Contact Person)

GREEN SCHOENFELD & KYLE LLP

(Firm/Company)

1380 ROYAL PALM SQUARE BOULEVARD

(Address)

FORT MYERS, FL 33919

(City, State and Zip Code)

daphnepoh@gskattorneys.com

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

For further information concerning this matter, please call:

DAPHNE POH

at ( 239 ) 936-7200

(Name of Contact Person)

(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)

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | <input type="checkbox"/> \$155.00 Filing Fees<br>and Certificate of<br>Status | <input type="checkbox"/> \$180.00 Filing Fees<br>and Certified Copy | <input checked="" type="checkbox"/> \$185.00 Filing Fees,<br>Certified Copy, and<br>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

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TALLAHASSEE, FLORIDA

**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:  
VISION ONE

(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 COLORADO

(Enter state, or if a non-U.S. entity, the name of the country)

on 2/19/2018

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

VISION ONE NATURALS, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: JANUARY 8, 2019

**(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.

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TALLAHASSEE FL 32399

Signed this 8TH day of JANUARY 2019

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: [Signature]

Printed Name: KEVIN KYLE

Title: AUTHORIZED REPRESENTATIVE

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: [Signature]

Printed Name: KEVIN KYLE

Title: AUTHORIZED REPRESENTATIVE

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**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)

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**Articles of Organization**

**of**

**Vision One Naturals, LLC**

**A Florida Limited Liability Company**

**1. Name**

The name of this limited liability company is Vision One Naturals, LLC (the "Company"), and it shall be formed as a Florida limited liability company under Chapter 605, Florida Statutes.

**2. Duration and Purpose**

The Company shall exist from the date of filing of these Articles of Organization with the Florida Secretary of State, and the Company's existence shall be perpetual. The Company is organized to transact all lawful activities and businesses that may be conducted by a limited liability company under the laws of the State of Florida.

**3. Place of Business**

The mailing address of the Company's principal office is 4905 Sands Boulevard, Cape Coral, FL 33914, and the street address of the Company's principal office is 4905 Sands Boulevard, Cape Coral, FL 33914.

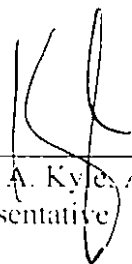
**4. Registered Agent and Office**

The name of the initial registered agent of the Company is GSK Registered Agents, Inc. The street address of the initial registered agent of the Company is 1380 Royal Palm Square Boulevard, Fort Myers, Florida 33919.

**5. Management of the Company**

The Company shall be managed by Manager or Managers and is, therefore, a manager-managed company. Katherine C. Lane shall serve as the initial Manager of the Company.

The undersigned executed these Articles of Organization effective as of January 8, 2019. In accordance with the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury the facts stated herein are true.

  
\_\_\_\_\_  
Kevin A. Kyle, Authorized  
Representative

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FLORIDA

**Acceptance by Registered Agent**

Having been named Registered Agent and designated to accept service of process for Vision One Naturals, LLC, at the place designated herein, and being familiar with the obligations of that position, GSK Registered Agents, Inc., hereby agrees to act in this capacity and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of its duties as Registered Agent.

GSK Registered Agents, Inc., a Florida  
corporation

By:   
Kevin A. Kyle, Vice President

Dated: January 8, 2019

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