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W19-7234



January 23, 2019

SARAH PRITCHARD 500 KNIGHTS RUN AVE #1311 TAMPA, FL 33602

SUBJECT: S.E. PRITCHARD LAW, LLC

Ref. Number: W19000007234

We have received your document for S.E. PRITCHARD LAW, 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Matthew T Moon Regulatory Specialist III

Letter Number: 619A00001610



COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: S.E. Pritchard Law, LLC			
	of Resulting Florida Limited	l Company)	
The enclosed Articles of Conversion, Business Entity" into a "Florida Limi			
Please return all correspondence cond	cerning this matter to:		
Sarah Pritchard			
(Contact Person	<u> </u>		
S.E. Pritchard Law, LLC			
(Firm/Company)		
500 Knights Run Ave #1311			
(Address)			
Tampa, FL 33602			
(City, State and Zip 6	Code)		
sarah@sepritchardlaw.com			
E-mail Address: (to be used for future an	nual report notifications)		
For further information concerning th	nis matter, please call:		
Sarah Pritchard	at (⁴⁰⁴)	01-5500	
(Name of Contact Person)		(Daytime Telephone Numb	per)
Enclosed is a check for the following dollars and drawn on a bank located i		ocessed by this office n	nust be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing and Certificate of Status	_	ees ☐\$185,00 Filing For Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle	New Fili Division P. O. Bo	ng Section of Corporations & 6327 see, FL 32314	. Acc

INHS11 (7/17)

Tallahassee, FL 32301

M1860003088

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,

	(Enter Name of Other Business Entity)
2. The "Other Bu	siness Entity" is a
(Enter	entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, fo	rmed or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
01/01/2017 on	
	ion, formation or incorporation)
3. The name of th	e Florida Limited Liability Company as set forth in the attached Articles of Organization:
S.E. Pritchard Law, L	LC
	(Enter Name of Florida Limited Liability Company)
(The effective dat	on the date of filing, enter the effective date: e: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after iment is filed by the Florida Department of State.)
Note: If the date inse	rted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
Note: If the date insedocument's effective	rted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this 9th	day of January	
Signature of Auth	horized Representative of Lim	ited Liability Company:
Signature of Author Printed Name: Sarah	orized Representative:	Title: Authorized Member
Signature(s) on be	chalf of Other Business Entity:	[See below for required signature(s)]
Signature:	$ \times$ \wedge α	
Printed Name: Sarah	Pritchard	Title: Authorized Member
Signature:		(n))
Printed Name:	··· <u>-</u> ·	Title:
Signature:		Title:
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature:		Title:
Printed Name:	·	Title:
Signature:		
Printed Name:		Title:
	ation: nan, Vice Chairman, Director, or cers have not been selected, an In	
	l Partnership or Limited Liabili	tv Partnership:
Signature of one G	eneral Partner.	
	Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u>	General Partners.	
All others: Signature of an autl	horized person.	
Fees:		
Articles of	Conversion:	\$25.00
	orida Articles of Organization:	\$125.00
Certified C Certificate		\$30.00 (Optional) \$5.00 (Optional)
Conneate	or omna.	ουτου (Optionar)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR ARTICLE I - Name: The name of the Limited Liability Company		JISH I COMI ANI
S.E. Pritchard Law, LLC		
(Must contain the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
500 Knights Run Ave #1311	500 Knights Run Ave #1311	
Tampa, FL 33602	Tampa, FL 33602	
The name and the Florida street address of the Sarah Pritchard	ne registered agent are:	
	ame	
500 Knights Run Ave #1311		
	P.O. Box NOT acceptable)	
Татра	F1_33602	
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as Registered Agent's S	l in this certificate, I hereby accoacity. I further agree to complete performance of my duties, as	cept the appointment as ly with the provisions of all- ud I am familiar with and
(CONT	INUED)	FILED 19FEB-7 AH 9:2 SEBNELLARE TO THE

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 AMBR	Sarah Pritchard		
500 Knights Run Ave #1311			
	Tampa, FL 33602		
	Tampari E 2.5882		
			
			
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(Use attachment if necessary)	> > > > > > > > > > > > > > > > > > >		7
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ARTICLE V: Other provisions, if any.		-4	
The state of the s	n .	A	
	Tr. v	<u>\$</u>	
	i v		
REQUIRED SIGNATURE:			
This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware that the Department of State constitutes a third degree felor	ı İ	
Sarah Pritchard			
Tv	ped 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)