# L19000037397

(Requestor's Name)	
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PICK-UP WAIT MAIL	
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#### **COVER LETTER**

TO:	New Filing So				
	Division of C	orporations			
SUB.	JECT: Craft & C		ulting Florida Limited	Com	
		(Name of Res	ulting Plorida Limited	Comp	oany)
					fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concerning	g this matter to:		
Joann	e Lee				
		(Contact Person)			
INC (	Corporate Services				
		(Firm/Company)			
45-()4	162nd Street, Suite				
		(Address)			
Flush	ing, NY 11358				
	(0	City, State and Zip Code)			
	ncfilings.com	<u> </u>			
E-	mail Address: (to b	e used for future annual re	port notifications)		
For f	urther informati	on concerning this ma	tter, please call:		
Joann	ne Lee			88-77	
	(Name of Conta	ict Person)	(Area Code)	(Dayt	ime Telephone Number)
		or the following amou a bank located in the		cess	ed by this office must be payable in US
(\$25 f & \$13	50.00 Filing Fees for Conversion 25 for Articles ganization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fe and Certified Copy	es	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STR	EET ADDRES	S:	MAILIN	G A	DDRESS:
	Filing Section		New Filit	_	
	sion of Corporat	ions	Division P. O. Box		orporations 27
	on Building Executive Cent	er Circle			., L 32314

Tallahassee, FL 32301

## I.N.C. Corporate Services

45-04 162<sup>nd</sup> Street, Suite 203, Flushing, NY 11358 Tel: 718-888-7773 / Fax: 718-888-8559

February 1, 2019

# Via federal express mail 6 pages including this page

New Filing Section
Florida Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
Tel: 850-245-6050

Re: Craft & Commerce LLC

Articles of Conversion and Articles of Organization

Please file this Articles of Conversion and Articles of Organization and return a filed copy to our office. Enclosed please find:

- 1. Cover Letter
- 2. Articles of Conversion and Articles of Organization
- 3. Check for \$150
- 4. Prefilled FedEx return envelope

Please return the filed copy to our office via <u>FedEx Standard Overnight</u> using our prefilled return envelope.

If you have any questions or concerns, please feel free to contact me at 718-888-7773. Thank you in advance for your assistance with this matter.

Sincerely,

Joanne Lee

LN.C. Corporate Services

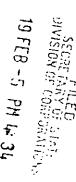
### Articles of Conversion For

### "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.

I. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Craft & Commerce LLP
(Enter Name of Other Business Entity) GP 1600000 207
2. The "Other Business Entity" is a limited liability partnership
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
on February 17, 2016
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Craft & Commerce 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 25th day of January	_ 20_19
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative:Printed Name: Mark Barker	Title: President of Mark Barker Consulting Incorporated, Managing Member
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)]
Signature: ulubl-	
Printed Name: Mark Barker	Title: President of Mark Barker Consulting Incorporated, General Partner
Signature:Printed Name:	
Signature:Printed Name:	Title
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liability	corporator must sign.
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty 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

Craft & Commerce LLC		
(Must contain the words "Limit	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
714 N. Hyer Avenue	714 N. Hyer Avenue	
Orlando, Fl. 32803	Orlando, FL 32803	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another	
(The Limited Liability Company cannot serve as its o	of the registered agent are:	IOLSTAIF 803S
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	of the registered agent are:  Mark Barker	SECRETA SECRETA H
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	of the registered agent are:  Mark Barker  Name	SECRETARY CONTROL FILE
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	of the registered agent are:  Mark Barker Name	SECRETARY OF ST JIVISION OF CORPOR
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	of the registered agent are:  Mark Barker Name  Name	SECRETARY OF STATE STATE OF STATE OF ST
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	of the registered agent are:  Mark Barker Name  IN. Hyer Avenue  Sess (P.O. Box NOT acceptable)	SECRETARY OF STATE JIVISION OF CORPORATIONS

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)

#### ARTICLE IV-

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

<u>Title:</u>	Name and Address:	Name and Address:		
"AMBR" = Authorized Member				
"MGR" = Manager				
AMBR	Mark Barker Consulting Incorporated			
	714 N. Hyer Avenue			
	Orlando, FL 32803			
AMBR	Acres Media Group, Inc.			
	714 N. Hyer Avenue	<del></del> -		
	Orlando, FL 32803			
	Orlando, FE 92009	<del></del>		
	. <del></del>	<del></del>		
		<del>_</del>		
		<del> </del>		
		<u></u>		
		FEB.		
(Use attachment if necessary)				
		2		
		PA		
ICLE V: Other provisions, if any.		<del>5.</del>		
TCBE 4. Other provisions, if any.		-		
		<del></del>		

#### 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.

Mark Barker, President of Mark Barker Consulting Incorporated, Managing Member

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)