

(Ře	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nari	ne)
. (Do	cument Number)	<u>. </u>
Centified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
ļ .		
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) (Business Entity Name) (Document Number) Certified Copies Certificates of Status		



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2019 DEC 30 PM 4: 07
SECRETARY OF STATE

K. PAGE

Office Use Only

JAN 0 3 2020



December 17, 2019

CINDY SUTTON 934 SW WORCESTER LN PORT ST LUCIE, FL 34953

SUBJECT: PICES OF HISTORY, LLC

Ref. Number: W19000109266

We have received your document for PICES OF HISTORY, LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Keyna E Page Regulatory Specialist II

Letter Number: 519A00025577

COVER LETTER

TO:	New Filing Se Division of C				
SliR	JECT: Pieces of	History, LLC			
.5 Q D	<u></u>	(Name of Res	ulting Florida Limit	ed Con	npany)
					d fees are submitted to convert an "Othe ecordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concerning	g this matter to:		
Cindy	Sutton				
		(Contact Person)			
Piece	s of History, LLC				
		(Firm/Company)			
934 S	W Worcester Ln				
		(Address)			
Port S	St Lucie, FL 34953				
	((City, State and Zip Code)			
	@piecesofhistory.c				
E-	mail Address: (to b	e used for future annual re	port notifications)		
For f	urther informati	on concerning this ma	tter, please call:		
Cindy	y Sutton		_at (\ 488-5	3357
	(Name of Conta	ict Person)	(Area Code)	(Day	time Telephone Number)
		or the following amou a bank located in the	•	rocess	sed by this office must be payable in US
(\$25 f & \$12	50.00 Filing Fees for Conversion 5 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STR	EET ADDRES	S:	MAIL	NG A	ADDRESS:
New	Filing Section		New Fi	-	
	sion of Corporat on Building	ions	Divisio P. O. B		Corporations 27
	Executive Cent	er Circle			FL 32314

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.

Pieces of History, LLC (Enter Name of Other Business Entity)	
2. 37 - NOrth on Developing Engine Limited Liability Company	
2. The "Other Business Entity" is a	ommon law or business trust, etc.
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entit	iy, the name of the country)
01 2/08/2009	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached	Articles of Organization:
Pieces of History, LLC	·
(Enter Name of Florida Limited Liability Company)	
01/01/2020	
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 that 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, the document's effective date on the Department of State's records.	
(The effective date: Cannot be prior to date of receipt or filed date nor more that date this document is filed by the Florida Department of State.)	his date will not be listed as the
(The effective date: Cannot be prior to date of receipt or filed date nor more that 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, the document's effective date on the Department of State's records.	his date will not be listed as the utes.

Signed this 18 day of November	_20 <u>_/9</u>	
Signature of Authorized Representative of Limit	ed Liability Company:	
Signature of Authorized Representative: Cindy Sutton	Listua !	
Signature(s) on behalf of Other Business Entity: [3]	See below for required signature(s)]	
Signature: Cindy Sutton Printed Name: Cindy Sutton	_Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:		
Printed Name:	_ Title:	
Signature:Printed Name:	_ Title:	-
Signature:Printed Name:	Title:	• -
Signature:Printed Name:	72.1	-
Printed Name:	Hite:	-
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liabili	corporator must sign.	
Signature of one General Partner.	-	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:	SECRE)
All others: Signature of an authorized person.		ARY OF
<u>Fees:</u>		5 FA
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	n.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.

ARTICLE 1 - Na	me*		•
	Limited Liability Company	is:	
Pieces of History, LL	.C		
(2)	hist contain the words "Limited Liab	oility Company, "L.L.C.," or "L.L.C	")
ARTICLE II - A The mailing addre		principal office of the Li	mited Liability Company is:
Principal Office	Address:	Mailing Address:	
934 SW Worcester L	.n		
Port St Lucie, FL 349			
(The Limited Liability (business entity with an	Registered Agent, Register Company cannot serve as its own Re a active Florida registration.) : Florida street address of th	egistered Agent. You must designt	ate an individual or another
	Cindy Sutton		<u> </u>
	No	ime	
	934 SW Worcester Ln		
		P.O. Box <u>NOT</u> acceptable	2)
	Port St Lucie	FL 34953	
	City	Zip	
liability con registered agen satures relati	ipany at the place designate it and agree to act in this caling to the proper and complebiligations of my position as Registered Agent's S	d in this certificate. I here pacity. I further agree to c ite performance of my duti	cess for the above stated limited by accept the appointment as comply with the provisions of accept with and familiar with and ded for in Chapter 605, F.S.

ARTICLE IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Cindy Sutton	
	934 SW Worcester Ln	
	Port St Lucie, FL 34953	_
AMBR	Jon Sutton	
	934 SW Worcester Ln	
	Port St Lucie, FL 34953	_
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	S I S	.
	AC IV	
	E A	
(Use attachment if necessary)	30 HAN	
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	SEE SEE	
TCLE V: Other provisions, if any.	C. F.	(
	F	
'E		

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.

Cindy Sutton

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) **S** 5.00 Certificate of Status (Optional)