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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:

Office Use Only

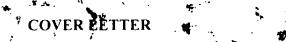
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TO: New Filing Section Division of Corporations

SUBJECT: Tegan Wolfe Design 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:

Tegan Wolfe				
	(Contact Person)			
Tegan Wolfe Design L	LC			یہ
	(Firm/Company)			B. 1
226 9th Ave N		·		ART JAN -4 PT
	(Address)			163 F
St. Petersburg, FL 337	701			PH 3: 34
(1	City, State and Zip Code)			بن بن
teganwolfe@gmail.com	m			3 C
E-mail Address: (to b	oe used for future annual re	port notifications)		7.
For further informati	on concerning this ma	tter, please call:		
Tegan Wolfe		at (970) 2	37-1367	
(Name of Conta	act Person)	_ \	Daytime Telephone N	umber)
	for the following amou a bank located in the		cessed by this offic	e must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fe and Certified Copy	es	and
Mailing Add	ress:	St	reet Address:	

New Filing Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

New Filing Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

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.

Tegan Wolfe Design LLC (Enter Name of Other Business Entity)	·
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, con	nmon law or business trust, etc.)
First organized, formed or incorporated under the laws of	the name of the country)
02/03/2015 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached A	Articles of Organization:
Tegan Wolfe Design 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 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, this document's effective date on the Department of State's records.	
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
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 document's effective date on the Department of State's records.	date will not be listed as the

Signed this 28	day of December	20 Lo.	
		Limited Liability Company:	
Signature of Author	rizedRepresentative: 📝	Title: President	
Printed Name: Tegai	n Wolfe	() Title: President	
			<u>.</u>
Signature(s) on beh	nalf of Other Business Enti	ty: [See below for required signature	(s)]
	Λ		
Signature:	Jan Will	Title: President	
Printed Name: 1egal	n Wolfe ()	Title: President	
Cionatura			
Printed Name:		Title:	
Timed Name	·	11tte	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:	- "-	Title:	
Signature:			
Printed Name:		Title:	
G :			
Signature:		Title:	
Printed Name:	.	I Hie:	
If Florida Corpora	tion:		
	ian, Vice Chairman, Director	r or Officer	
_	ers have not been selected, a		
	··· - ··· - , ·		
If Florida General	Partnership or Limited Li	ability Partnership:	
Signature of one Ger	neral Partner.	-	
			-
		ability Limited Partnership:	 سے
Signatures of ALL (General Partners.		7.1
A 11 - 41			2
All others:	arized person		O G
Signature of an auth-	orizea person.		Ę
Fees:			:
<u>1 ccs.</u>			
Articles of (Conversion:	\$25.00	-
ATTICIOS OF C	JOHYCISIOH.	Ψ ΔJ. VU	

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status: 21 JAN -4 PM 3: 34

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Tegan Wolfe Design LLC		
(Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC."	")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Lim	ited Liability Company is:
Principal Office Address:	Mailing Address:	
226 9th Ave N	226 9th Ave N	
St. Petersburg, FL 33701	St. Petersburg, FL 3370	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)		
The name and the Florida street address of the r	egistered agent are:	
Tegan Wolfe		
Name	· · · · · · · · · · · · · · · · · · ·	
226 9th Ave N		
Florida street address (P.O	. Box <u>NOT</u> acceptable)	
St. Petersburg	FI 33701	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete paccept the obligations of my position as registered Agent's Sign	this certificate, I hereby ity. I further agree to cor performance of my duties,	accept the appointment as nply with the provisions of all , and I am familiar with and
(CONTIN	UED)	$\mathbf{Q}_{\mathbf{L}}$

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Tegan Wolfe
	226 9th Ave N
	St. Petersburg, FL 33701
	J. 1 Storeday, 1 2 307 61
	
(Use attachment if necessary)	
	in in
	3.55 C.
LE V: Other provisions, if any.	り。 ラム
	
REQUIRED SIGNATURE:	
	WOR
Signature of a member or a	n authorized representative of a member
This document is executed in accordance v	with section 605,0203 (1) (b). Florida Statutes, Lam award
any false information submitted in a docum as provided for in s.817.155, F.S.	ent to the Department of State constitutes a third degree I
	1116
- legay	ed or printed name of signee
.Тур	ed 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)