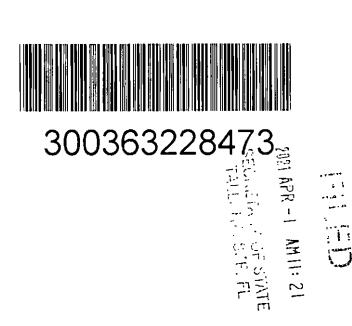
La1000134540

(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
P-CK-JP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer	

Office Use Only



04/01/21--01006--005 **185.00

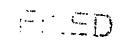
11/1/1/1/1/2

COVER LETTER

TO:	New Filing S Division of C				
CHD		The Trophy	Line, LLC.		
SUB	3JECT:	(Name of Res	sulting Florida Lim	ted Con	npany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	se return all corr	espondence concernin	g this matter to:		
Shar	ron Ladman				
The	Trophy Line, LLC	(Contact Person)		-	
3990	Centurian Way	(Firm/Company)		-	
		(Address)		_	
Fern	andina Beach, Flo	orida 32034 		_	
Shar	(ron@TheTrophyLi	City, State and Zip Code)	=		
E	-mail Address: (to b	oe used for future annual re	port notifications)	-	
For f	further informati	on concerning this ma	tter, please call:		
Shar	ron Ladman		310 _at (488-	8428
	(Name of Conta	act Person)	(Area Code) (Day	rtime Telephone Number)
		for the following amou a a bank located in the		process	sed by this office must be payable in US
(\$25 & \$1	150.00 Filing Fees for Conversion 25 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		S185.00 Filing Fees. Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

*

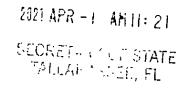


Articles of Conversion

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: The Trophy Line, LLC.
(Enter Name of Other Business Entity)
Limited Liability Corporation 2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
South Carolina
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
September 28, 2015
On
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: The Trophy Line, 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 23rd day of March	_ 20
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative Printed Name: Sharon Ladman	Title: Authorized Member
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Printed Name: Name:	
Printed Name: Name	Title: Authorized Member
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	_ Title:
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 Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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

	The Trophy Line, LLC.		
	(Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing add		ne principal office of the Limited	Liability Company is:
Principal Offic	ee Address:	Mailing Address:	
3990 Centurian	Wav	3990 Centurian Way	
	-	Farmer Doorb FL 0000	,
ARTICLE III (The Limited Liabili	- Registered Agent, Regist	Fernandina Beach, FL 3203 ered Office, & Registered Ager Registered Agent. You must designate an in	nt's Signature:
(The Limited Liabili business entity with	- Registered Agent, Regist	ered Office, & Registered Ager Registered Agent. You must designate an in	nt's Signature:
ARTICLE III (The Limited Liabili business entity with	- Registered Agent, Regist ty Company cannot serve as its own an active Florida registration.) the Florida street address of Todd Sabo	ered Office, & Registered Ager Registered Agent. You must designate an in	nt's Signature: dividual or another SECRETAR - 1
ARTICLE III (The Limited Liabili business entity with	- Registered Agent, Regist ty Company cannot serve as its own an active Florida registration.) the Florida street address of Todd Sabo	ered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are:	nt's Signature: dividual or another SECRETAR - 1
ARTICLE III (The Limited Liabili business entity with	- Registered Agent, Regist ty Company cannot serve as its own in an active Florida registration.) Todd Sabo 613 Fir Street	ered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are:	nt's Signature:
ARTICLE III (The Limited Liabili business entity with	- Registered Agent, Regist ty Company cannot serve as its own in an active Florida registration.) Todd Sabo 613 Fir Street	ered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are:	nt's Signature: dividual or another SECRETAR - 1

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)

A	R	TI	C	LE	I٧	' -
			•			

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

MGR" = Manager	
AMBR	Sharon Ladman
	2931 Bailey Rd.
	Fernandina Beach, FL 32034
AMBR	Todd Sabo
	2931 Bailey Rd.
	Fernandina Beach, 32034
Use attachment if necessary)	
- 1.01	
.E V: Other provisions, if any. hy Line, LLC. will engage in Any and Al	I Lawful Business

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.

Sharon Ladman

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)