L21000195033

(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:				

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SECRETARY OF STATE
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COVER LETTER

TO: New Filing S Division of O			
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SUBJECT:	ected-Cat (na (Name of Res	ines, LLC	
	(Name of Res	sulting Florida Limited (Company)
		_	and fees are submitted to convert an "Other accordance with s. 605,1045, F.S.
	respondence concernin	_	
James	(Contact Person) Cut (nam(5) (Firm/Company)		
Geered-	(Firm/Company)	LLC	
	S Miami Au (Address)	je #1102	-
Miami	FL 3317 City, State and Zip Code)	3 <i>0</i>	
E-mail Address: (to	e geekedou be used for future annual re	tgames. Con	1
For further informat	ion concerning this ma	tter, please call:	
Jamie	Davies	_at (312)	SO2-5877 Daytime Telephone Number)
(Name of Cont	act Person)	(Area Code) (I	Daytime Telephone Number)
	for the following amount a bank located in the		essed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fee and Certified Copy	S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add New Filing S Division of C	Section	Ne	ect Address: w Filing Section vision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32314

P.O. Box 6327



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2021

JAMIE DAVIES 801 S. MIAMI AVENUE #1702 MIAMI, FL 33130

SUBJECT: JAMIE DAVIES, LLC Ref. Number: W21000052857

We have received your document for JAMIE DAVIES, 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):

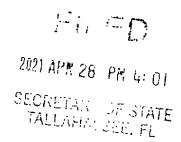
Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by If the converting entity is a corporation, the certificate of applicable law. conversion must be signed by a chairman, vice chairman, officer, director, 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.

Neysa Culligan Regulatory Specialist III

Letter Number: 821A00008012



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: Jamie Davies, LLC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of New York as safe, (Enter state, or if a non-U.S. entity, the name of the country)
on May, Discontinuous formation or incorporation).
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Gicked Cal Games LL-C
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: effective date of filing
(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 15th day of Ma	₩ *
Signature of Authorized Representati	ive of Limited Liability Company:
Signature of Authorized Representative Printed Name: <u>James J. Davit</u>	Title: Owner Founder Chairman
	ss Entity: See below for required signature(s)
Signature:	Title: <u>@wncr</u>
Printed Name: / J Emis J. Dav	Title: <u>@wncv</u>
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	

If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of <u>ALL</u> General Partners.

All others:
Signature of an authorized person.

Articles of Conversion: Fees for Florida Articles of Organization:

\$25.00

\$125.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Creeked-Out Grames LLC

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Northwest Registered Agent LLC Name 7901 4th St N STE 300 Florida street address (P.O. Box NOT acceptable)	Principal Office A	Address:	Mailing .	Address:	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Northwest Registered Agent LLC Name 7901 4th St N STE 300		Mian: Ave	<- 7 5 Am	r <i>E</i>	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Northwest Registered Agent LLC Name 7901 4th St N STE 300	·	4 33130			
Name 7901 4th St N STE 300					dividual or another
Name 57.4 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	business entity with an a	active Florida registration	1.)	u must designate an in	dividual or another
7901 4th St N STE 300	business entity with an a	active Florida registration Florida street addre	ess of the registered ag	u must designate an in	dividual or another SECRETA TALLA
Florida street address (P.O. Box NOT acceptable)	business entity with an a	active Florida registration Florida street addre	ss of the registered ag	u must designate an in	2021 APR 28 SECRETARY TALLARY
	business entity with an a	Etive Florida registration Florida street addre Northwest Re	ess of the registered ag gistered Agent LLC Name	u must designate an in	2021 APR 28 PM SECRETARY OF TALLAHARSE
	business entity with an a	Plorida registration Florida street addre Northwest Re 7901 4th St	ess of the registered aggistered Agent LLC Name N STE 300 dress (P.O. Box <u>NOT</u>	u must designate an in	2021 APR 28 PM SECRETARY OF TALLAHARSE

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.



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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager A-MD/L (14.44)	Janus Davis S 801 S. Miam, Ave, #1702- Hurami, FC 33130
(Use attachment if necessary)	SECRETALLA
ARTICLE V: Other provisions, if any.	28
REQUIRED SIGNATURE:	A D STATE
Signature of a member or a	n authorized representative of a member

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.

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)