

L21000267840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

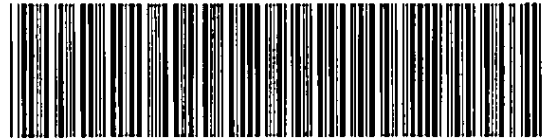
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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21 MAY 18 PM 2:55

J DENING
JUN - 9 2021

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SHREWSBERY 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:

NICOLE SHREWSBERY

(Contact Person)

SHREWSBERY DESIGN LTD

(Firm/Company)

4321 BAY FOREST TER

(Address)

JACKSONVILLE, FL 32277

(City, State and Zip Code)

NICOLE.SHREWSBERY@LIVE.COM

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

NICOLE SHREWSBERY at (989) 780-2716

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☐ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☒ \$185.00 Filing Fees,
Certified Copy, and
Certificate of Status

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

The Articles of Conversion **and attached Articles of Organization** 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:
SHREWSBERY DESIGN LTD

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LLC
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of OHIO
(Enter state, or if a non-U.S. entity, the name of the country)

on 07/08/2010
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
SHREWSBERY DESIGN LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: 05/06/2021

(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 6 day of MAY 2021.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: 
Printed Name: NICOLE A. SHREWSBERY Title: PRESIDENT

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: 
Printed Name: NICOLE A. SHREWSBERY Title: PRESIDENT

Signature: 
Printed Name: MYCHAL R. SHREWSBERY Title: VP

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SHREWSBERY DESIGN LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

5549 FORT CAROLINE RD

SUITE 134

JACKSONVILLE, FL 32277

Mailing Address:

5549 FORT CAROLINE RD

SUITE 134

JACKSONVILLE, FL 32277

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:

NICOLE A. SHREWSBERY

Name

5549 FORT CAROLINE RD STE 134

Florida street address (P.O. Box **NOT** acceptable)

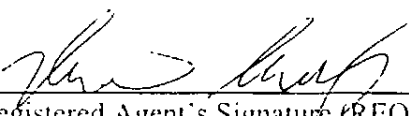
JACKSONVILLE

FL 32277

City

Zip

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:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

PRES

VP

Name and Address:

NICOLE A. SHREWSBERY

5549 FORT CAROLINE RD STE 134

JACKSONVILLE FL 32277

MYCHAL R. SHREWSBERY

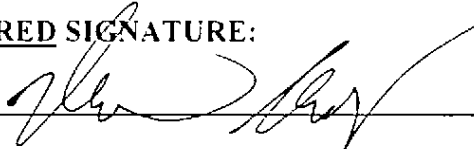
5549 FORT CAROLINE RD STE 134

JACKSONVILLE FL 32277

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

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.

NICOLE A. SHREWSBERY

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)

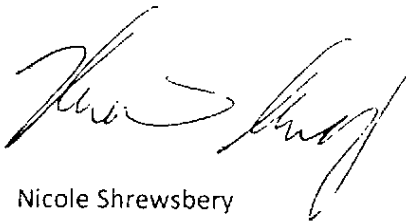
May 7, 2021

To Division of Corporations New Filing Section,

I would like to move my LLC from Ohio to Florida. I have been trying to call to determine which form is the appropriate form but have not been able to get through calling 850-245-6052 multiple times.

Since I have not been able to get through, please see both of the forms in question to determine which is the appropriate form.

Any questions or concerns please call me at 989-780-2716.

A handwritten signature in black ink, appearing to read 'Nicole Shrewsbury', with a stylized, cursive script.

Nicole Shrewsbury

Shrewsbury Design LTD

989-780-2716

Nicole.shrewsbury@live.com



Thu May 06 2021

Entity#: 1949259
Filing Type: DOMESTIC LIMITED LIABILITY COMPANY
Original Filing Date: 07/08/2010
Location: ---
Business Name: SHREWSBERY DESIGN LTD

Status: Active
Exp. Date: -

Agent/Registrant Information

NICOLE SHREWSBERY
2708 DRUMMOND RD
TOLEDO OH 43606
07/08/2010
Active

Filings

Filing Type	Date of Filing	Document ID
ARTICLES OF ORGNZTN/DOM. PROFIT LIM.LIAB. CO.	07/08/2010	201019601077

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF SECRETARY OF STATE

I, Frank LaRose, Secretary of State of the State of Ohio, do hereby certify that this is a list of all records approved on this business entity and in the custody of the Secretary of State.



*Witness my hand and the seal of the
Secretary of State at Columbus,
Ohio this 6th of May, A.D. 2021
Ohio Secretary of State*

Frank LaRose



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/16/2010	201019601077	ARTICLES OF ORGNZTN/DOM. PROFIT LIM.LIAB. CO. (LCP)	125.00	.00		.00	.00

Receipt

This is not a bill. Please do not remit payment.

SHREWSBERY DESIGN
2808 DRUMMOND RD
TOLEDO, OH 43606

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1949259

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

SHREWSBERY DESIGN LTD

and, that said business records show the filing and recording of:

Document(s):

ARTICLES OF ORGNZTN/DOM. PROFIT LIM.LIAB. CO.

Document No(s):

201019601077



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus,
Ohio this 8th day of July, A.D. 2010.

Ohio Secretary of State



**Form 533A Prescribed by the:
Ohio Secretary of State**

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)

www.sos.state.oh.us
Busserv@sos.state.oh.us

Expedite this form: (select one)
Mail form to one of the following:

☐ Expedite PO Box 1390
Columbus, OH 43266

--- Requires an additional fee of \$100 ---

☒ Non Expedite PO Box 670
Columbus, OH 43266

2010 JUL 23 PM 2:22

**ARTICLES OF ORGANIZATION FOR A DOMESTIC
LIMITED LIABILITY COMPANY**

Filing Fee: \$125.00

(CHECK ONLY ONE (1) BOX)

<p>(1) <input checked="" type="checkbox"/> Articles of Organization for Domestic For-Profit Limited Liability Company (115-LCA) ORC 1705</p>	<p>(2) <input type="checkbox"/> Articles of Organization for Domestic Nonprofit Limited Liability Company (115-LCA) ORC 1705</p>
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Name of limited liability company

Shrewsbury Design Ltd.

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "Ltd.," or "Ltd"

Effective Date

(Optional)

mm/dd/yyyy

(The legal existence of the limited liability company begins upon the filing of the articles or on a later date specified that is not more than ninety days after filing)

This limited liability company shall exist for

(Optional)

Period of Existence

Purpose

(Optional)

To be formed for any purpose or purposes for which individuals lawfully may associate themselves.

☐ Check here if additional provisions are attached

ORIGINAL APPOINTMENT OF AGENT

The undersigned authorized member(s), manager(s) or representative(s) of

Shrewsbury Design Ltd.

Name of Limited Liability Company

hereby appoint the following to be Statutory Agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is

Nicole Shrewsbury

Name of Agent

2808 Drummond Rd.

Mailing Address

Toledo

City

Ohio

State

43606

Zip Code

☐ If the agent is an individual and using a P.O. Box, check this box to certify the agent is an Ohio resident.

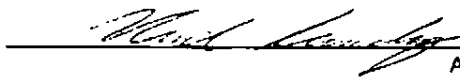
ACCEPTANCE OF APPOINTMENT

The undersigned, named herein as the statutory agent for

Shrewsbury Design Ltd.

Name of Limited Liability Company

hereby acknowledges and accepts the appointment of agent for said limited liability company



Agent's Signature