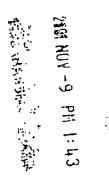
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(OR) Otate/Elph Hollow)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Emily Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies
Special Instructions to Filing Officer:



800371727418

08/16/21--01048--028 **150.00



Office Use Only

W2/00/17. scot29

NOV 1 7 2021



August 26, 2021

MARCY YESALIS 96047 SOAP CREEK DRIVE FERNANDINA BEACH, FL 32034

SUBJECT: TAYLOR TOFFEE COMPANY, LLC

Ref. Number: W21000117429

We have received your document for TAYLOR TOFFEE COMPANY, 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):

Please complete date information top conversion pGE 2.,

Please return the corrected original and one copy of 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.

Letter Number: 621A00020582

Tyrone Scott Regulatory Specialist II New Filings Section

www.sunbiz.org

COVER LETTER

TO: New Filing So Division of Co				
SUBJECT: Taylor To	ffee Company, LLC			
		ulting Florida Limi	ted Cor	npany)
		_		d fees are submitted to convert an "Othe coordance with s. 605.1045, F.S.
Please return all corre	spondence concerning	g this matter to:		
Marcy Yesalis				
	(Contact Person)			
	(Firm/Company)		-	
96047 Soap Creek Driv	re			
	(Address)		_	
Fernandina Beach, FL	32034			
(C	ity. State and Zip Code)		=	
myesalis@yahoo.com				
E-mail Address: (to be	used for future annual re	port notifications)	_	
For further information	on concerning this ma	tter, please call:		
Marcy Yesalis		_at (214	649-	1676
(Name of Contac	et Person)	(Area Code	(Day	rtime Telephone Number)
Enclosed is a check for dollars and drawn on	_		proces	sed 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 and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
<u>Mailing Addr</u> New Filing Se			-	t Address: Filing Section
Division of Co				ion of Corporations
P.O. Box 6327	-			Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: ylor Toffee Company, LLC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fir	st organized, formed or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
on	January 29, 2018
· · ·	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Ta	ylor Toffee Company, LLC
	(Enter Name of Florida Limited Liability Company)
(The Note document	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.) the late inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ument's effective date on the Department of State's records.
5. 7	The plan of conversion has been approved in accordance with all applicable statutes.
	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 day of September	<u></u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Title: Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: Marcy Yesalis	Title: Member
Signature:Printed Name:	Title
Timed Name.	
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signatura	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
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	y is:
Taylor Toffee Company, LLC	
	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company is:
_	
Principal Office Address:	Mailing Address:
96047 Soap Creek Drive	96047 Soap Creek Drive
Fernandina Beach, FL 32034	Fernandina Beach, FL 32034
	Registered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
Marcy Yesalis	
	Name
96047 Soap Creek Drive	
Florida street address ((P.O. Box <u>NOT</u> acceptable)
Fernandina Beach	FL 32034
City	Zip
liability company at the place designate registered agent and agree to act in this constant statutes relating to the proper and complete accept the obligations of my position at Registered Agent's	and to accept service of process for the above stated limited ed in this certificate. I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605. F.S Signature (REQUIRED)

ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	_
AMBR	Marcy Yesalis, Trustee of the Rocket Man Trust
	96047 Soap Creek Drive
	Fernandina Beach, FL 32034
	
(Use attachment if necessary)	
(Use attachment if necessary) CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	or an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member This document is executed in accorda	or an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes. I am aware the ocument to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member This document is executed in accorda any false information submitted in a d	ince with section 605.0203 (1) (b), Florida Statutes. I am aware th

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)