# 1 22000/03049

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

Office Use Only

T. SCOTT MAR 14 2022



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12/21/21--91008--016 +\*25.00

10/13/21--01002--028 \*\*125.00





## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 1, 2021

RANDY PAGE 28046 LOIS DR TAVARES, FL 32778

SUBJECT: DR PAGE ENTERPRISE LLC

Ref. Number: W21000137093

We have received your document for DR PAGE ENTERPRISE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The balance due is \$25 and owner is not a title in article in article IV.,

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 applicable law. If the converting entity is a corporation, the certificate of 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.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee

until the following calendar year.

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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 621A00025148

#### **COVER LETTER**

Division of Co.				
SUBJECT: DR Page I	Enterprise LLC			
5077017C11		ulting Florida Limi	ted Con	pany)
				d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corres	pondence concerning	g this matter to:		
Randy Page				
	(Contact Person)		_	
DR Page Enterprise				
	(Firm Company)	-	_	
28046 Lois Dr				
	(Address)	•	-	
Tavares , FI 32778				
ıCi	ty, State and Zip Code)		-	
randypage@comcast.ne	et			
I;-mail Address: (to be	used for future annual re	port notifications)	-	
For further information	i concerning this ma	tter, please call:		
Randy Page	_	at ( <sup>770</sup>	605-1	885
(Name of Contact	Person)	(Area Code	(Day	time Telephone Number)
Enclosed is a check for dollars and drawn on a	<del>-</del>		rocess	ed by this office must be payable in US
(\$25 for Conversion	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Addre				Address:
New Filing Sec Division of Co.				Filing Section on of Corporations
P.O. Box 6327	i portations			entre of Tallahassee
Tallahassee, FI	. 32314		24151	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:  DR Page Enterprise LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or it a non-U.S. entity, the name of the country)
on 08/12/2011 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
DR Page Enterprise LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
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 17 day of September	20
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Randy Page	Title: Owner
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: //w// a	
Signature: Rhung Page	Title: OWNER
Signature:	
Printed Name:	Title:
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	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL 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 1 - Name:	
The name of the Limited Liability Company is:	
DR Page Enterprise LLC	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
Dringing LOSS on Address	Mailing Address:
Principal Office Address:	Maning Address.
28046 Lois Dr	28046 Lois Dr
Tavares FI 32778	Tavares , Fl 32778
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
	Constant and the second second
The name and the Florida street address of the re	gistered agent are:
Randy Page	
Name	
28046 Lois Ðr	
Florida street address (P.O.	Box NOT acceptable)
Tavares	FL_32778
City	Zip
•	·
Having been named as registered agent and to	accept service of process for the above stated limited
registered agent and agree to act in this capaci	this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all
statutes relating to the proper and complete p	erformance of my duties, and I am familiar with and
accept the obligations of my position as reg.	istered agent as provided for in Chapter 605, F.S
Kin D.	
Registered Agent's Signa	ature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager  The second control of the s	Randy Page
11 3510	28046 Lois Dr
	Tavares , Fl. 32778
<del></del>	
(Use attachment if necessary)	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
1/2	10.0
	siya
	or an authorized representative of a member
Signature of a member of	see with section 605 0705 (1) (b), Florida Statutes, Lain awars
This document is appointed in accordan	cument to the Department of State constitutes a third degree