(R	requestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(C	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to Filing Officer:	



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08/31/22--01002--008 \*\*21.25

07/19/22--01031--023 \*\*128.75

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T. SCOTT

AUG 3 1 2022



2022 /UP 17 PH I2: 08

July 28, 2022

ANN E DEEGR 43457 WATERSIDE TRAIL PUNTA GORDA, FL 33982

SUBJECT: ANNIEDOTES LLC Ref. Number: W22000098554

We have received your document for ANNIEDOTES LLC and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Wisconsin IIc must convert to FLORIDA.,

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: 722A00016881

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www.sunbiz.org

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# COVÉR LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Anniedotes LLC	
(Name of Resulting Florida Limited Company)	
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.	er
Please return all correspondence concerning this matter to:	
Ann E Deeg (Contact Person)	
(Contact Person)	
Anniedotes LLC (Firm/Company)	
43457 Waterside Trl	
(Address)	
Punta Gorda FL 33982  (City. State and Zip Code)  anndeeg @anniedotes, Cim	
anndeeg @anniedotes, Cum	
E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
Ann Deea 920 475-6750	
Ann Deeg at 920 475-6750  (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)	3
\$\sum_{\text{S150.00 Filing Fees}}	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Previous Sent Sent Sent Sent Sent Sent Sent Sent	
\$ 21 2°	

#### **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 pr Anniedotes LLC	ior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Er	
2. The "Other Business Entity" is a LLC	ship, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of	Wisconsin
(Ente	r state, or if a non-U.S. entity, the name of the country)
on 1/9/2016 (date of organization, formation or incorporation)	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as se Anniedotes LLC	
(Enter Name of Florida Limited Liability C	ompany)
4. If not effective on the date of filing, enter the effective da	te:
(The effective date: Cannot be prior to date of receipt or the date this document is filed by the Florida Departmen Note: If the date inserted in this block does not meet the applicable state	filed date nor more than 90 calendar days after tof State.)
document's effective date on the Department of State's records.	
5. The plan of conversion has been approved in accordance v	vith all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay which such members are entitled under ss. 605,1006 and 60	

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Signed this 12 day of August a	20
Signature of Authorized Representative of Limi	•
Signature of Authorized Representative:	MEDeeg_ _Title:_ <u>Manager</u> _
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Cann Enlegy Printed Name: Ann E. Deeg	_Title: _manager lowner
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 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 Liabilit Signatures of ALL. General Partners.	ty 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

ARTICLE I - Name:

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:  Ann & Deeg  Name  43457 Waterside TRI LAND SEED FOR ANOT SEED FOR ANOT SEED FOR ANOTHER VIDE FOR ANOTHER V	The name of the Limited Liability Company is:	
ARTICLE II - Address:  Principal Office Address:  Mailing Address:  Mailing Address:  May 57 Waterside Tr)  Punta Gorda FL  AND E DEEG  Name  Having been named as registered agent and to accept service of process for the global state of 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.	Anniedotes LLC	
The mailing address and street address of the principal office of the Limited Liability Company is:  Principal Office Address:    Mailing Address:   Mailing Address:	(Must contain the words "Limited Liability Company, "L.E.C" or "LLC.")	
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 street address of the registered agent are:  Ann & Deeg  Name  43457 Waterside TRI  Florida street address (P.O. Box NOT acceptable)  Punta Gorda, 33982  City Zip Florida Street Signature  Having been named as registered agent and to accept service of process for the above sized 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.		ny 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:  And E Deeg  Name  Having been named as registered agent and to accept service of process for 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	Principal Office Address: Mailing Address:	
The familiar viith an active Florida street address of the registered agent are:  And E Deeg  Name  Having been named as registered agent and to accept service of process for the above steed limited liability company at the place designated 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.	Punta Gorda FL Punta Gorda FL 33982	Tr1 3982
Name  Having been named as registered agent and to accept service of process for 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.	(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another	
Purta Gorda, 33982  City  Zip  Having been named as registered agent and to accept service of process for the above start 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.	The name and the Florida street address of the registered agent are:	
Purta Gorda, 33982  City  Zip  Having been named as registered agent and to accept service of process for the above start 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.	, Ann E Deeg	
Purta Gorda, 33982  City  Zip  Having been named as registered agent and to accept service of process for the above start 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.	Name	
Purta Gorda, 33982  City  Zip  Having been named as registered agent and to accept service of process for the above start 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.	43457 Waterside TRIES F	credinal
City Zip  Having been named as registered agent and to accept service of process for the above stand 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	Florida street address (P.O. Box NOT acceptable)	
City Zip  Having been named as registered agent and to accept service of process for the above start 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	Punta Gorda, 33982, SARE 8	
Having been named as registered agent and to accept service of process for the above stand 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	City Zip Page 2	
ClennEDeeg	Having been named as registered agent and to accept service of process for the above stand liability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provision statutes relating to the proper and complete performance of my duties, and I am familiar with	nt as ns of all th and
	(lenn & Deeg-	
Registered Agent's Signature (REQUIRED)	Registered Agent's Signature (REQUIRED)	

(CONTINUED)

"MGR" = Manager  Manager  Ann E Deeg  H3H57 WaterSide Trl  Punta Gorda, FL 3398  (Use attachment if necessary)  CLE V: Other provisions, if any.	~	- <b>N</b>
(Use attachment if necessary)	<del></del>	Ann E Deeg 43457 Waterside Tri
		Punta Gorga, FL 3398
• /		
• /		
• •		
	(Use attachment if necessary)	
TEV: Other provisions, if any.	(vise with the transfer of the costal p)	
	LE V: Other provisions, if any.	
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REQUIRED SIGNATURE:	(Amm E. )	Dooas
<del></del>		U
Cann E Deeg	<ul> <li>This document is executed in accordance w</li> </ul>	rith section 605.0203 (1) (b), Florida Statutes. I am aware t
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 to any false information submitted in a document to the Department of State constitutes a third degree fe		$\bigcap$ eea
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 any false information submitted in a document to the Department of State constitutes a third degree fe as provided for in s.817.155, F.S.	Ann E.	_ ULCY
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 to any false information submitted in a document to the Department of State constitutes a third degree fe	Ann E.	

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

ARTICLE IV-

Company: