# 123000253320

(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:
/LJ23600064391

Office Use Only



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03/07/23--01025--018 \*\*86.25

05/24/23--01008--015 \*\*98.75

2023 MAY 24 AM 1: 48
SECRETARY OF STATE
TALL AND SECRETARY SECRETA

## **COVER LETTER**

TO: New Filing Section Division of Corporations	1
SUBJECT: Salty Das Dolphin (Name of Resulting Florida)	Adventure Tours LLC Limited Company)
The enclosed Articles of Conversion, Articles of Organi Business Entity" into a "Florida Limited Liability Comp	ization, and fees are submitted to convert an "Other pany" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter	to:
Dary Shumate  (Contact Person)  Salty Doas Dolphin and Adventure	——————————————————————————————————————
(Firm/Company)  2222 W. 33, 5t.  (Address)	Tours  Ref. 3000 Long Early  All Market Long Early  Tours  Ref. 100 Long Early  Tours  Tours
Panama City, FL. 32405  (City, State and Zip Code)  (Coach dany @ ao   . Com  E-mail Address: (to be used for future annual report notification)	
For further information concerning this matter, please company Shumate at (857)  (Area Column of Contact Person)  (Area Column of Contact Person)	) 624-6968 E
Enclosed is a check for the following amount: (All check dollars and drawn on a bank located in the United States	eks processed by this office must be payable in US s)
□ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of and Certified 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 8705  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:
Salty Das Doldhin and Adventure Tours
(Enter Name of Other Business Entity)
Content relative of Other Differences Entity)
2. The "Other Business Entity" is a <u>Glyera</u> Darthers hip
(Emer emity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
<u> </u>
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
1.12/00
on $1/1/2/2$ .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Sall Das Dill. & 110
Salty Dogs Dolphin Adventure Tours LLC.
(Enter Name of Florida Limited Liability Company)
4. 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.)
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.
document serrective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.
3. The plan of conversion has been approved in accordance with an 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.
mion such monitoris are charact ander 35, 005,1000 and 005,1001-005,1072, 1,5,
$\sim$
202: 77:

Signed this 17th day of May	20_23
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Dary Printed Name: Dary Shumate	Shumate
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Dany I Shumate	
Signature: Chasteen  Printed Name: Billy Chasteen	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Printed Name: Billy Chastren	Title: MINBK
Signature: Printed Name: Printed Name: Shu mate	
Printed Name: Jenniter Shumate	Title: <i>WGR</i>
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> 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)
Continuent of Dialus.	φυ.ου (Ομασιαι)

2023 MAY 24 AM 1: 48 SECKETARY OF STATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
Salty Dogs Dolphin (Musicontain the words "Limited Liability	Adventure Tours LLC Company, "L.I.C.," or "LI.C.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2222 W. 33nd st. Panama City, Fl. 32405	2222 W. 33 W St. Panama City, Fl. 32405
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: ed Agent. You must designate an individual or another
The name and the Florida street address of the re-	gistered agent are:
Dany Shum Name	ate
2222 W. 33.d.	St.
Florida street address (P.O.	Box NOT acceptable)
Panama City	FL 32405
City /	Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S
Registered Agent's Signa	ture (REQUIRED)
(CONTINU	PALLAHAS

Α	R	ΤI	$\mathbf{C}$	LE	I	V-

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

"AMBR" = Authorized Member "MGR" = Manager	_ 1 <1 1
AMBR	Dany I Shymate
	2222 W. 33N. St. Panama City, Ft. 32405
1 10 0	Panama City, 17. 5240s
AMBR	Billy Chasteen
	2203 W. 37.W. St. 32405
0100	tanama City, FC. 32405
MGR	Jennifer Shumate
	Panama City, FL. 32405
	19/15
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	•
LE V: Other provisions, if any.	
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that mem to the Department of State constitutes a third degree felon
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605,0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felon
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felon ped or printed name of signee
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Dayy  S125.00 Filing Fee for Articles of	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felong ped or printed name of signee  Filing Fees  Of Organization and Designation of Registered Age
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Dayy  Ty	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felon ped or printed name of signee  Filing Fees of Organization and Designation of Registered Again)  \$ 5.00 Certificate of Status (Optional)
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Dayy  S125.00 Filing Fee for Articles of	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felon ped or printed name of signee  Filing Fees of Organization and Designation of Registered Agail)  \$ 5.00 Certificate of Status (Optional)
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