# L240000488920

11.21.24

(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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THE STATE OF STATE





October 16, 2024

JUSTIN PHILLIP VANDENHAUVEL 1125 E BROADWAY UNIT 2090 GLENDALE, CA 91205 US

SUBJECT: DOGTIMES PRODUCTIONS, LLC

Ref. Number: W24000141639

We have received your document for DOGTIMES PRODUCTIONS, LLC and check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

Please return 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: 224A00022861

Matthew H Hitchcock Regulatory Specialist II

www.sunbiz.org

#### **COVER LETTER**

TO:	New Filing S Division of G	Section Corporations				
SUBJ	IECT:	DOGTIM	1ES F	PRODU	ICTIO	NS LLC
		(Name of Res	ulting F	lorida Lin	ited Con	npany)
The e	nclosed Article less Entity" int	es of Conversion, Artic o a "Florida Limited Li	les of ( ability	Organiza <sup>,</sup> Compar	tion, and y" in ac	d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all cor	respondence concerning	g this 1	matter to:		
	Just	tin Phillip VandenH	euve	I		
		(Contact Person)				
	DogT	imes Prods.; Justin	Phill	lip		
		(Firm/Company)			_	
	1125 E	E Broadway Unit 20	90			
		(Address)			_	
	GI	endale, CA 91205				
	(	(City, State and Zip Code)			_	
	jp	@justinfilm.com				
E-1	nail Address: (to	be used for future annual rep	ort not	ifications)	_	
For fu	ırther informat	ion concerning this mat	ter, pl	ease call:		
	Justi	n Phillip	_at (_	818	)	754-7149
	(Name of Cont	act Person)	(	(Area Code	c) (Day	time Telephone Number)
		for the following amount a bank located in the t			process	ed by this office must be payable in US
(\$25 fc & \$125	60.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status		80.00 Filing Certified Co		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27			New F Division The C 2415 P	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303

The second

#### **Articles of Conversion**

1.15 ....

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 prior to the filing of the Articles of Conversion is:  DogTimes Productions
(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
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  DOGTIMES PRODUCTIONS LLC
(Enter Name of Florida Limited Liability Company)  4. If not effective on the date of filing, enter the effective date: 10-04-2024
(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

Signed this04 day of October	<del></del>
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:	Fitle: Founder, Owner
·	
Signature(s) on behalf of Other Business Entity:	See below for required signature
Signature:	
Printed Name: Marianne Burch	Title:CEO
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Tiele
rinco name:	inc:
Signature:	
Printed Name:	Title:
Signatura	
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 In-	corporator must sign.
If Florida General Partnership or Limited Liabili	tu Partnerchin
Signature of one General Partner.	ty Farthership.
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fces:	
Articles of Conversion:	\$25.00
. Attende of Control Stoll.	
Fees for Florida Articles of Organization:	\$125.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the L	me: imited Liability Company is:	:		
	DOGTIMES PRODUC	CTIONS	LLC	
(M)	ust contain the words "Limited Liabili	ty Company, '	"L.L.C.," or "LLC.")	
ARTICLE II - Ac		rincipal of	fice of the Limited Liability Compan	y is:
Principal Office	Address:	Mailing	g Address:	
28833 Dis	scovery Rd	1	125 E Broadway	
			Unit 2090	
Tavares,	FL 32778	Gle	endale, CA 91205	
business entity with an	ompany cannot serve as its own Regis active Florida registration.) Florida street address of the a Justin F	registered	You must designate an individual or another agent are:	
	Nam	<del></del>	<del></del>	
	28833 Disc	overv Ro	d	
	Florida street address (P.C			
	Tavares	FL	32778	
	City	<del></del>	Zip	
liability comp registered agent statutes relatin	any at the place designated in and agree to act in this capac g to the proper and complete	n this certif city. I furth performan	ervice of process for the above stated l ficate, I hereby accept the appointmen her agree to comply with the provision ce of my duties, and I am familiar with gent as provided for in Chapter 605, F	t as s of al t and

(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	Name and Address:
AMBR; MGR; OWNER	Justin Phillip VandenHeuvel
	28833 Discovery Rd
	Tavares, FL 32778
AMBR; CEO	Marianne Burch
	332 Westpoint Dr
	Claremont, CA 91711

(Use attachment if necessary)

**ARTICLE V:** Other provisions, if any.

DOGTIMES PRODUCTIONS LLC	Employer Identification Number:
C/O JUSTIN PHILLIP S-CORPS	85-1746526
This document is executed in accordance wit	authorized representative of a member th section 605.0203 (1) (b), Florida Statutes. I am aware that at to the Department of State constitutes a third degree felony.
as provided for in s.817.155, F.S.	No sile sopulation of state commutes a unit degree follows:
Justin	Phillip VandenHeuvel

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)

I, Justin Phillip Vanden Heuvel, Owner of DogTimes Productions, LLC - Florida Filing Number: L24000267927 authorize Name Release Affidavit for DOGTIMES PRODUCTIONS, LLC to be dissolved.

I, Justin P. Vanden Heuvel, release the DogTimes Productions corporation name.

CEO/Owner:

Justin P. Vanden Heuvel
28833 Discovery Rd.

Tavares, FL 32778

Signed:

11-19-2027

NOTARY:

SEE ATTACHED
NOTARIAL CERTIFICATE

## **ACKNOWLEDGMENT**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness; accuracy, or validity of that document.

Signature Yesenia M. Have

validity of that document.
State of California County of The Augules -
On <u>Majoinbis 19,0004</u> before me, <u>Tesenian. Hare, Matain Public</u> (insert name and title of the officer)
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
WITNESS my hand and official seal.  YESENIA N. WARE Notary Public - California

(Seal)

Commission # 2405709