

P140000 26722

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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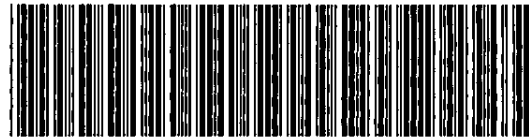
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
14 MAR 25 PM 12:40

W14-K212

32619



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 17, 2014

RICHARD A. JACOBSON
501 E. KENNEDY BLVD, SUITE 1700
TAMPA, FL 33602

SUBJECT: KLONDIKE AGRICULTURAL PRODUCTS, INC.
Ref. Number: W14000016742

We have received your document for KLONDIKE AGRICULTURAL PRODUCTS, INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

now filed ✓ As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 914A00005653

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Klondike Agricultural Products, Inc.

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Richard A. Jacobson

Contact Person

Fowler White Boggs P.A.

Firm/Company

501 E. Kennedy Boulevard, Suite 1700

Address

Tampa, FL 33602

City, State and Zip Code

jacobson@fowlerwhite.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard A. Jacobson at (813) 222-1159

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$105.00 Filing Fees

☐ \$113.75 Filing Fees
and Certificate of
Status

☐ \$113.75 Filing Fees
and Certified Copy

☐ \$122.50 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Charter Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Charter Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000017598

Entity Name: KLONDIKE AGRICULTURAL PRODUCTS, LLC

Current Principal Place of Business:

115 PERIMETER CENTER PLACE
SOUTH TERRACES SUITE 170
ATLANTA GA 30346

Current Mailing Address:

115 PERIMETER CENTER PLACE
SOUTH TERRACES SUITE 170
ATLANTA GA 30346 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACOBSON, RICHARD A ESQ.
501 E. KENNEDY BOULEVARD
SUITE 1700
TAMPA FL 33602 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RICHARD A. JACOBSON

03/24/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name SCHMIDT, PETER H ESQ.
Address 115 PERIMETER CENTER PLACE
SOUTH TERRACES SUITE 170
City-State-Zip: ATLANTA GA 30346

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PETER H. SCHMIDT II

MGR

03/24/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

SECRETARY OF STATE
DIVISION OF CORPORATE & BUSINESS SERVICES
14 MAR 25 PM 12:40

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Klondike Agricultural Products, LLC *L/2 000-17598*

Enter Name of Other Business Entity

2. The "Other Business Entity" is a **Limited Liability Company**

(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of **Florida**

(Enter state, or if a non-U.S. entity, the name of the country)

on **February 6, 2012**

Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

Klondike Agricultural Products, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: _____
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 11 day of March, 2014.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: _____

Printed Name: Richard A. Jacobson Title: Incorporator

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: _____

Printed Name: Richard A. Jacobson Title: Authorized Representative

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

**ARTICLES OF INCORPORATION
OF
KLONDIKE AGRICULTURAL PRODUCTS, INC.**

SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 25 PM 12:40

The undersigned, acting as incorporator of a corporation under the Florida Business Corporation Act, does hereby adopt the following articles of incorporation for such corporation (the "Corporation"):

ARTICLE I

Name

The name of the Corporation is Klondike Agricultural Products, Inc.

ARTICLE II

Initial Principal Office and Mailing Address

The initial principal office and mailing address of the Corporation is 115 Perimeter Center Place, South Terraces, Suite 170, Atlanta, Georgia 30346.

ARTICLE III

Shares

The Corporation shall have authority to issue 10,000 common shares with a par value of \$0.01 per share.

ARTICLE IV

Initial Registered Agent and Office

The street address of the Corporation's initial registered office is 501 E. Kennedy Blvd., Suite 1700, Tampa, Florida 33602 and the name of the Corporation's initial registered agent at that address is Fowler White Boggs, P.A., care of Richard A. Jacobson.

ARTICLE V

Incorporator

The name and address of the incorporator are:

Name

Address

Richard A. Jacobson

Fowler White Boggs, PA
501 E. Kennedy Blvd., Suite 1700
Tampa, FL 33602

ARTICLE VI
Indemnification

No director of the Corporation shall be personally liable to the Corporation or its shareholders for monetary damages to the Corporation or any other person for any statement, vote, decision or failure to act, regarding corporate management or policy, as a director, except to the extent that such exemption from liability or limitation thereof is not permitted under the Florida Business Corporation Act.


The Corporation shall indemnify to the full extent permitted by law any person who is made, or is threatened to be made, a party to any action suit or proceeding (whether civil, criminal, administrative or investigative) by reason of the fact that he or she is or was a director or officer of the Corporation or serves or served any other enterprises at the request of the Corporation. If the Florida Business Corporation Act is amended after the filing of these Articles of Incorporation of which this Article VII is a part to authorize corporate action further eliminating or limiting the personal liability of directors, then the liability of a director of the Corporation shall be eliminated or limited to the fullest extent permitted by the Florida Business Corporation Act as so amended.

Any repeal or modification of the foregoing paragraph by the shareholders of the Corporation shall not adversely affect any right or protection of a director of the Corporation existing at the time of such repeal or modification.

ARTICLE VIII
Effective Date

The foregoing amendment shall become effective upon filing with the Department of State of the state of Florida.

Dated this 11th day of March, 2014.



Name: Richard A. Jacobson
Title: Incorporator

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for Klondike Agricultural Products, Inc., at the place designated as the registered office, 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 duties and obligations of my position as registered agent.

Dated this 11th day of March, 2014.

REGISTERED AGENT:

FOWLER WHITE BOGGS P.A.

By: 

Name: Richard A. Jacobson

Title: Authorized Agent