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PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: Lazarini Family Partnership, L.P. (Name of Resulting Florida Limited Partnership or Limited Liability Limited Partnership) The enclosed Certificate of Conversion, Certificate of Limited Partnership, and fees are submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S. Please return all correspondence concerning this matter to: Tricia M.Y. Tweel (Contact Person) Harris Shelton Hanover Walsh (Firm/Company) 6060 Poplar Ave, Suite 450 (Address) Memphis, TN 38119 (City, State and Zip Code) For further information concerning this matter, please call: at (901) 682-1455
(Area Code and Daytime Telephone Number) Tricia M.Y. Tweel (Name of Contact Person) Enclosed is a check for the following amount: ☑ \$1,052.50 Filing Fees □ \$1,061.25 Filing Fees □ \$1,105.00 Filing Fees □ \$1,113.75 Filing Fees, (\$52.50 for Conversion and Certificate of Certified Copy, and and Certified Copy and \$1,000 - Certificate) Status Certificate of Status

STREET ADDRESS:

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

MAILING ADDRESS:

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

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SECRETARY OF STATE TALLAHASSEE FLORIDA

Certificate of Conversion

For

"Other Business Organization"

Into

Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

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

Lazarini Family Partnership, L.P. (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a Limited Partnership (Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of Tennessee (Enter state, or if a non-U.S. entity, the name of the country) on March 13, 2007 (Enter date "Other Business Entity" was first organized, formed or incorporated)

3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:

Lazarini Family Partnership, L.P.

(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)

4. The conversion was approved as required by Chapt such a manner that complied with the converting organ		• •	
5. If not effective on the date of filing, enter the effect (The effective date: 1) cannot be prior to nor more document is filed by the Florida Department of Stathe effective date listed in the attached Certificate of effective date is listed therein.)	than 90 day te; <u>AND</u> 2)	must be the same as	
Signed thisday of March	. 20 08		
Signature of Each General Partner Listed in Attached of Land Pasce Land Land Pasce Land Land Land Land Land Land Land Land	Certificate o	f Limited Partnership:	
Certificate of Conversion: Fees for Florida Certificate of Limited Partners (\$965 Filing Fee and \$35 Filing Fee)		.50 .00	
Certified Copy:		.50 (Optional)	
Certificate of Status:	\$ 8	.75 (Optional)	

08 MAR 18 AM 11: 26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

1. Lazarini Family Partnership, L.P.
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
2. 400 Kelly Plantation Drive, Unit 1003
(Street address of initial designated office)
Destin, Florida 32541
_{3.} Gary L. Lazarini
(Name of Registered Agent for Service of Process)
_{4.} 400 Kelly Plantation Drive, Unit 1003
(Florida street address for Registered Agent)
Destin, Florida 32541
5. 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 relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.
Signature of Registered Agent
_{6.} 400 Kelly Plantation Drive, Unit 1003
(Mailing address of initial designated office)
Destin, Florida 32541
7. If limited partnership elects to be a limited liability limited partnership, check box .

8. Name and business address of each generated business of each generated business address of each generated business of	neral partner: Business Add	lress:		
Gary L. Lazarini	400 Kelly Plantation Drive, Unit 1003			
	Destin, Florida 32541			
Elizabeth Pesce Lazarini	400 Kelly Plantation Drive, Unit 1003 Destin, Florida 32541			
			OB HAR	
9. Effective date, if other than the date of filing:_		=	10 PM	
(Effective date cannot be prior to nor mor filed by the Florida Department of State.)	e than 90 days a	fter the date the docun	AMII: 26 REFLORIDA THE STATE TH	
Signed this day of	larch		_·	
Signature of each general partner:	El. 154	0 Lus		
- Say of Sance		Case of Julia	<u>. </u>	
	00.00 (\$965 Filing 52.50 8.75	Fee and \$35 Registered A	gent Fee)	