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(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only

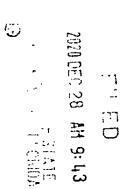
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TO:	New Filing Division of	Section Comboration	S	, •	· 	,,	•		
SUBJ	ECT:		3447 West	t Kennedy B	Blvd., LLC				
			(Name of Re	sulting Florid	da Limited C	ompany)	-		
	nclosed Articl ess Entity" int								
Please	e return all cor	respondenc	e concernin	g this matt	er to:				
		V. Stephe	n Cohen						

868-6162
(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)

\$150.00 Filing Fees (\$25 for Conversion & S125 for Articles of Organization)

\$\int \frac{1}{2}\$\$ \$155.00 Filing Fees and Certified Copy & S185.00 Filing Fees, Certified Copy, and Certificate of Status

Mailing Address:

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

Street Address:

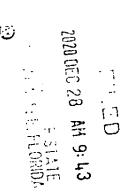
New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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 prior to the filing of the Articles of Conversion is: 3447 West Kennedy Blvd., Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
04/08/1996 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
3447 West Kennedy Blvd., 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.
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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.



Signed this 9th day of November	20 <u></u>
Signature of Authorized Representative of Lim	
Signature of Authorized Representative: Printed Name: Eugene O'Steen	Title: Managing Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Signature: Steen Steen	Title: D, P, S & T
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ind	Officer. 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:
3447 West Ken	nnedy Blvd., LLC
	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of th	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3447 W. Kennedy Blvd	3420 West North A Street
Tampa, Florida 33609	Tampa, Florida 33609
The name and the Florida street address of t Joseph	he registered agent are:
	ame
	Boulevard Suite 310 P.O. Box NOT acceptable)
Tampa	FL 33609
City	Zip
liability company at the place designate registered agent and agree to act in this cal statutes relating to the proper and comple accept the obligations of my position as Registered Agent's S	nd to accept service of process for the above stated limited and in this certificate, I hereby accept the appointment as a pacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and is registered agent as provided for in Chapter 605, F.S Signature (REQUIRED)

<u>Fitle:</u> AMBR" = Authorized Member MGR" = Manager	Name and Address:
AMBR	Eugene O'Steen 3420 West North A Street
	Tampa, Florida 33609
MGR	Eugene O'Steen
	3420 West North A Street
	Tampa, Florida 33609
Use attachment if necessary)	
LE V: Other provisions, if any,	

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)