# L190000 94615

(Requestor's Name)
( 4
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Decree and Newshort)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE

1011-10 6. 1:12

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 721168 7704032
AUTHORIZATION: Spelle le man
COST LIMIT : \$ 150.00
ORDER DATE : April 10, 2019
ORDER TIME: 12:19 PM
ORDER NO. : 721168-015
CUSTOMER NO: 7704032
FOREIGN FILINGS
NAME: WEMBLY MANAGER LLC
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Lydia Cohen EXT#

EXAMINER: \_\_\_\_

#### COVER LETTER

TO: N	New Filing So	ection			
1	Division of C	orporations			
SUBJEC	CT: Wembly	Manager LLC			
		(Name of Res	ulting Florida Limite	d Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please re	etum all corre	espondence concernin	g this matter to:		
David J. F	Ritter, Esq.				
Brach Eic	hler LLC	(Contact Person)			
		(Firm/Company)			
101 Eisen	hower Parkway	<i>!</i>			
		(Address)			
Roseland	, New Jersey 07	7068			
	((	ity. State and Zip Code)			
dratter@br	racheichler.com	ı			
E-mail	Address: (10 b	e used for future annual re	port notifications)		
For furth	ner informatio	on concerning this ma	tter, please call:		
David J. F	Ritter, Esq.		_at ()	١	3-5700
(	Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
Enclosed dollars a	l is a check to nd drawn on	or the following amou a bank located in the	nt: (All checks pr United States)	ocess	sed by this office must be payable in US
☐ \$150.0 (\$25 for C & \$125 fo of Organiz	r Articles	☐\$155.00 Filing Fees and Certificate of Status	(1)\$180.00 Filing F and Certified Copy		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
New Fili Division Clifton E	F ADDRESS  ng Section  of Corporati  Building  ecutive Cente	ons	New Fil Division P. O. Bo	ing Son of Cox 632	Corporations

Tallahassee, FL 32301

## Articles of Conversion

For

## "Other Business Entity"

lnto

### 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.

	(Enter Name of Other Business Entity)
2. The	"Other Business Entity" is alimited liability company
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First or	ganized, formed or incorporated under the laws of New Jersey
	(Enter state, or if a non-U.S. entity, the name of the country)
on Ma	rch 13, 2015
(dat	e of organization, formation or incorporation)
3. The	name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Wen	nbly Manager LLC
-	(Enter Name of Florida Limited Liability Company)
4. If no	ot effective on the date of filing, enter the effective date: April 17, 2019
(The et	ffective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the dat	e this document is filed by the Florida Department of State.)
Note: 11 documer	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the at 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.

	10th April
Signed thi	s 10th day of April 20 13
Signature	of Authorized Representative of Limited Liability Company:
Signature	of Authorized Representative:  Sunil Kumar, as the Trustee for Wembly 2015 GRAT (EIN: 47-6902748) which is the sole member of Wembly Manager LLC
Signature	(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature:	- Smil times
	Sunil Kumar, as the Trustee for Wembly 2015 GRAT (EIN: 47-6902748), which is the sole member of Wembly Manager LLC

#### If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

## 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.

#### All others:

Signature of an authorized person.

#### Fees:

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - 3	Name:						
	c Limited Liability Company	y is:					
Wemply Manager I	LLC						
	(Must contain the words "Limited Li	ability Company,	"L.L.C" or "LLC.")				
ARTICLE II - The mailing add	Address: dress and street address of th	ie principal of	fice of the Limite	ed Liability Company is:			
Principal Offic	e Address:	Mailing Address:					
10295 Collins Ave	nue, Unit 703	10295 C	ollins Avenue, Unit 7	03			
Sal Harbour, Florid	pa 33154	Bal Harb	our, Florida 33154				
				<del></del>			
The name and the		the registered Kumar	agent are:				
	10295 Collins Avenue, Unit	703					
	Florida street address (	P.O. Box <b>NO</b>	T acceptable)				
	Bal Harbour	FL	33154				
	City		Zip				
liability co registered age statutes rela	named as registered agent an impany at the place designate and agree to act in this cating to the proper and complete obligations of my position as Registered Agent's S	ed in this certifupacity. I furthete performants registered ag	ficate, I hereby ac her agree to comp ce of my duties, a hent as provided fo	cept the appointment as ly with the provisions of all nd I am familiar with and			

(CONTINUED)

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#### ARTICLE IV-

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

#### Title:

#### Name and Address:

Authorized Member and Sole Member

Wemply 2015 GRAT (EIN: 47-6902748) 10295 Collins Avenue Bal Harbour, Florida 33154

### REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sunil Kumar, as the Trustee for the sole member, Wembly 2015 GRAT (EIN: 47-6902748)

Typed or printed name of signee

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agen S 30.00 Certified Copy (Optional)

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