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

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12/28/21--01023--035 **150.00

CAPITAL CONNECTION, INC.

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67 REEF ROAD LI	LC		
<u>.</u> <u>.</u>			
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 			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend, File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Cinatura			Fictitious Owner Search
Signature			Vehicle Search
	_ 		Driving Record
Requested by:			UCC 1 or 3 File
			UCC 11 Search
Name	Date	Time	UCC 11 Retrieval
Walk-In Thomasvie GA &		Jp	Courier

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.

67 Reef Road LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(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)
09/10/2015 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: 67 Reef Road 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 22nd day of December	20 <u>Z</u> (
Signature of Authorized Representative of Li	imited Liability Company:
Signature of Authorized Representative:	
Printed Name: E. Scott Dahlgren	Title: Manager
Signature(s) on behalf of Other Business Entity	g: [See below for required signature(s)]
Signature:	TV-1 Manager
Printed Name: E. Scott Dahlgren	
Signature:	
Printed Name: Erin C. Dahlgren	Title: Manager
	-
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
rimed ivanic.	True.
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 Liab	cilian Duna
Signature of one General Partner.	only Partnership:
organizations of our continue and our co	
If Florida Limited Partnership or Limited Liab	oility Limited Partnership:
Signatures of ALL General Partners.	,
All othores	
All others: Signature of an authorized person.	
organized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization	
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the L	me: .imited Liability Compan	y is:
	•	•
67 Reef Road LLC		
(M	ust contain the words "Limited L	iability Company, "L.I.,C.," or "LI,C.")
ARTICLE II - A	ddress:	
		he principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
415 L'Ambiance Dr	ive	415 L'Ambiance Drive
#D506		#D506
Longboat Key, FL 3	4228	Longboat Key, FL 34228
	Blalock Walters, P.A.	Same
	802 11th Street West	
	Florida street address ((P.O. Box <u>NOT</u> acceptable)
	Bradenton	FL 34205
	City	Zip
liability comp registered agant statutes relatin	pany at the place designate and agree to act in this co g to the proper and compl digations of my position a	nd to accept service of process for the above stated limited ed in this certificate. I hereby accept the appointment as appacity. I further agree to comply with the provisions of allete performance of my duties, and I am familiar with and as registered agents as provided for in Chapter 605, F.S Signature (REQUIRED)

(CONTINUED)



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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR = Manager	E. Scott Dahlgren
	415 L'Ambiance Drive #D506
	Longboat Key, FL 34228
MGR	Erin C. Dahlgren
 	415 L'Ambiance Drive #D506
	Longboat Key, FL 34228
(Use attachment if necessary)	
CLE V: Other provisions, if any, EFF	ECTIVE DATE: 01/01/2022
REQUIRED SIGNATURE:	, ;
1-1-8-11	
- day of and -	*****
Signature of a member of	r an authorized representative of a member
This document is executed in accordance	re with section 605,0203 (1) (b), Florida Statutes, I am aware tha
any talse information submitted in a doc	ument to the Department of State constitutes a third degree felor

| Siling Fees | Siling Fee for Articles of Organization and Designation of Registered Agent | \$ 30.00 Certified Copy (Optional) | \$ 5.00 Certificate of Status (Optional)

F. SCOTT DAHLGREN
Typed or printed name of signee