A07000000023

(Requ	uestor's Name)
(Addr	ress)
(Addr	ress)
(City/	State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busi	ness Entity Name)
· (Docu	ument Number)
Certified Copies	Certificates of Status
Special Instructions to Fi	lling Officer:





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DCEX ACTION
DIVISION ACTIONS
TALLAHASSEC, FLORIDA

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SECRETARY OF STATE

Sonstate Research Requester's Name Address City/State/Zip Phone # Office Use Only
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):
1. Krieger Family Partneralt
2.
(Corporation Name) (Document #)
\cdot
3.
4. (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status
NOW OF INCO
NEW FILINGS AMENDMENTS Amendment Resignation of R.A., Officer/Director Limited Liability Domestication Other Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS REGISTRATION/QUALIFICATION
Annual Report Fictitious Name Foreign Limited Partnership Reinstatement Trademark Other Other
Examiner's Initials

CR2E031(7/97)



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:

Certificate of Conversion is: Krieger Family Partners, Ltd. (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 Texas (Enter state, or if a non-U.S. entity, the name of the country) on 9/20/01 (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:

Krieger Family Partners, LLLP

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

4. The conversion was approved as required by Chapter 62 such a manner that complied with the converting organizate	
5. If not effective on the date of filing, enter the effective of	late:
(The effective date: 1) cannot be prior to nor more that document is filed by the Florida Department of State; Athe effective date listed in the attached Certificate of Lieffective date is listed therein.)	n 90 days after the date this AND 2) must be the same as
Signed this 29th day of December	. 20 <u>0</u> Ç
Signature of Each General Partner Listed in Attached Certi	ficate of Limited Partnership:
Marla Kries	
_	
Fees:	
Certificate of Conversion:	\$ 52.50
Fees for Florida Certificate of Limited Partnership: (\$965 Filing Fee and \$35 Filing Fee)	\$1,000.00
Certified Copy:	\$ \(52.50 \) (Optional)
Certificate of Status:	\$ 8.75 (Ontional)



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

Krieger Family Partners LLLP
(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 ₂ 3402 Captains Way
(Street address of initial designated office)
Jupiter, FL 33477
_{3.} Marla Krieger
(Name of Registered Agent for Service of Process)
_{4.} 3402 Captains Way
(Florida street address for Registered Agent)
Jupiter, FL 33477
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
_{5.} 3402 Captains Way
(Mailing address of initial designated office)
Jupiter, FL 33477

7. If limited partnership elects to be a limited liability limited partnership, check box .

8. Name and business address of each Name:	ch general partner: <u>Business Address:</u>
Krieger General, L.L.C.	3402 Captains Way
U0740400228	Jupiter, FL 33477
9. Effective date, if other than the date of fi	ling:
filed by the Florida Department of S	
Signed this 29th day of	December 2006
Signature of each general partner:	
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$ 52.50 \$ 8.75