A080000981

| - | (Requestor's Name) | | | | |
|---|--------------------------|--|--|--|--|
| | (Address) | | | | |
| | (Address) | | | | |
| | (City/State/Zip/Phone #) | | | | |
| PICK-UF | P WAIT MAIL | | | | |
| | (Business Entity Name) | | | | |
| (Document Number) | | | | | |
| Certified Copies | Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | | |
| | | | | | |
| | | | | | |
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2016 APR 20 P 3: 59

APR 21 2016

J. BKUCE

COVER LETTER

| TO: | Registration Division of | Section Corporations | | | | | |
|----------------------|--------------------------|--|----------------------|-----------------------------------|--|--|--|
| SUBJ | JECT: | Blumb | erg Fa | mily LLLP | | | |
| | | of Florida Limited Partne | rship or Li | mited Liability I | Limited Partnership | | |
| Limit | ted Partnership | icate of Conversion as or Limited Liability cordance with s. 620.2 | Limited I | Partnership in | | | |
| Pleas | e return all con | rrespondence concerni | ing this n | natter to: | | | |
| | | John B. Even, Esq. | | | | | |
| | | Contact Person | | | | | |
| | Schmitt Schr | neck Smyth Casey 8 | k Even, I | P.C. | | | |
| | | Firm/Company | | | | | |
| | 1221 Ea | ast Osborn Road, Su | uite 105 | | | | |
| | | Address | | | | | |
| | Ph | oenix, Arizona 8501 | 14 | | 2016 APR 20 | | |
| | | City, State and Zip Code | | | | | |
| | john | even@azbarristers.d | com | | 2 7 | | |
| | E-mail address: (t | o be used for future annua | l report no | tification) | | | |
| For fi | urther informa | tion concerning this n | natter, ple | ease call: | 17 T | | |
| | Julie | Garman | at (| 602 | 277-7000 | | |
| | Name of Cont | tact Person | | Area Code and | Daytime Telephone Number | | |
| Enclo | osed is a check | for the following amo | ount: | | | | |
| √ \$52 | .50 Filing Fee | \$61.25 Filing Fee and Certificate of Status | | 05.00 Filing Fee ertified Copy | \$113.75 Filing Fee, Certified Copy, and Certificate of Status | | |
| STR | EET ADDRE | SS: | | MAILING | ADDRESS: | | |
| Registration Section | | | Registration Section | | | | |
| | sion of Corpora | ations | | | Corporations | | |
| | on Building Executive Ce | nter Circle | | P. O. Box (| 6327 e, FL 32314 | | |
| | hassee, FL 32 | | | i ananasse | J2J17 | | |

Certificate of Conversion

For

Florida Limited Partnership or Limited Liability Limited Partnership Into

"Other Organization"

This Certificate of Conversion is submitted to convert the following Florida Limited Partnership or Limited Liability Limited Partnership into an "Other Organization" in accordance with s. 620.2104, Florida Statutes.

| 1. The name of the Florida Limited Partnership or Limited Liability Limited Partnership converting into the "Other Organization" is: |
|--|
| Blumberg Family LLLP |
| Enter Name of Florida Limited Partnership/Limited Liability Limited Partnership |
| 2. The name of the "Other Organization" is: |
| GRDSAZ FAMILY LLC |
| Enter Name of "Other Organization" |
| 3. The "Other Organization" is a limited liability company |
| (Enter entity type. Example: corporation, limited liability company. |
| general partnership, common law or business trust, etc.) |
| organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country) |
| 4. The above referenced Florida Limited Partnership or Limited Liability Limited Partnership has converted into an "Other Organization" in compliance with Chapter 620, F.S., and the conversion complies with the applicable laws governing the "Other Organization." |
| 5. The plan of conversion was approved by the converting Florida Limited Partnership or Limited Liability Limited Partnership as required by Chapter 620, F.S., and the governing aw of the converted "Other Organization." |

| 6. This | conversion w | as effective u | nder the laws govern | ing the "Other C | rganization" | | | | | |
|--------------------|---|--|---|-------------------|--|-------------|--|--|--|--|
| on; Ap | ril <u>l</u> , 2016 | | | | | <u>:</u> | | | | |
| busines address | s in Florida, tl | ne "Other Org | n out-of-state organiz anization" lists the fo partment of State ma | ollowing street a | ınd mailing | | | | | |
| Street A | Address: | c/oShipping Point Marketing,4425 E.Agave Rd,Bldg4 Ste118 | | | | | | | | |
| Mailing | ; Address: | 10869 Nort | , Arizona 85044 h Scottsdale Road Arizona 85254 | Suite 103-123 | 3, | | | | | |
| Signed | this | _day of | April | 20 | 16 | | | | | |
| Signatu | re of Each Ge | heral Partner | listed in Certificate of | f Limited Partne | 2016 APR 20 P 3: 59 SECHETARY OF STATE SECHETARY OF STATE SECHETARY OF STATE STATE ORIDA | | | | | |
| (| Filing Fee: Certified Copy Certificate of | | \$52.50 \$52.50 (Optional) \$8.75 (Optional) | | | | | | | |