A1000000410

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

Office Use Only



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10 JUL 28 PH I: 44
SECRETARY OF STATE

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: GATOR WATERVIEW PARTNERS, LLLP				
Name of	Resulting Florida Limited I	Partnership or Limited	d Liability Limited Partnership	
The enclosed Certificate of Conversion, Certificate of Limited Partnership, and fees are submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S.				
riease return an corre	spondence concerning	uns matter to.		
JL	JLIE A. CARSON			
	Contact Person			
GATOR INVESTMENTS				
	Firm/Company			
1595 NE 163RD STREET				
	Address			
	MAMI BEACH, FL 33	162		
City, State and Zip Code				
JCARSON@GATORINV.COM E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
JULIE A.	CARSON	at (305)	949-9049	
Name of Cor	itact Person	Area Code and	Daytime Telephone Number	
Enclosed is a check for	or the following amoun	t:		
\$1,052.50 Filing Fees (\$52.50 for Conversion and \$1,000 – Certificate)	and Certificate of	\$1,105.00 Filing and Certified Copy	Fees \$1,113.75 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS	:	MAILIN	G ADDRESS:	
Registration Section		_	on Section	
Division of Corporation	•			
Clifton Building	fton Building P. O. Box 6327 61 Executive Center Circle Tallahassee, FL 32314			
Tallahassee, FL 3230		i ananass	cc, 1 L 32314	

Certificate of Conversion

For

"Other Business Organization"

FILED

10 JUL 28 PM 1:44 Into Florida Limited Partnership or Limited Liability Limited Partnership SECRETARY OF STATE 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: GATOR WATERVIEW PARTNERS LLC (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a _____LIMITED LIABILITY COMPANY (Enter entity type. Example: corporation, limited liability company, 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) JULY 15, 2010

(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:

GATOR WATERVIEW PARTNERS, LLLP

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

- 4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.
- 5. If not effective on the date of filing, enter the effective date: 07/28/10
 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Limited Partnership, if an effective date is listed therein.)

Signed this _	27th day of JULY		20 <u>10</u>		
Signature of Each General Partner Listed in Attached Certificate of Limited Partnership/Limited Liability Limited Partnership:					
i ai thership/	Limited Liability Limited I aith	ersinp:			
Signature: Printed Name	: JAMES A. GOLDSMAN		MGR OF ITS SOLE GP		
	/				
Signature:	Λ				
Printed Name	:	Title:			
	V				
Signature:					
Printed Name	·	Title:			
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Signature:					
Printed Name	:	Title:			
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Signature					
Printed Name	·	Title:	· · · · · · · · · · · · · · · · · · ·		
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Signature					
Printed Name	:	Title			
Timed Name	•	11116.			
signature(s).]	nature(s) on behalf of Other Busin				
Drintad Nama	: JAMES A. SOLDSMITH	Title	Man of S. A. Manhau		
rimed maine	, GAIVILO A. GOLDOVII III	1 1116.	myr. of some member		
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 Liability Company: Signature of a Member or Authorized Representative.					
All others: Signature of a	n authorized person.				
Fees:					
Camile	icate of Conversion:		¢ 52.50		
			\$ 52.50		
Fees for Florida Certificate of Limited Partnership: \$1,000.00					
	(\$965 Filing Fee and \$35 Filing l	ee)			
	ied Copy:		\$ 52.50 (Optional)		
Certif	icate of Status:		\$ 8.75 (Optional)		

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

GATOR WATERVIEW 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. 1595 NE 163RD STREET
Street address of initial designated office
NORTH MIAMI BEACH, FL 33162
3. JAMES A. GOLDSMTIH
Name of Registered Agent for Service of Process
4. 1595 NE 163RD STREET
Florida street address for Registered Agent
NORTH MIAMI BEACH, FL 33162
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
6. 1595 M. E. 163 P.O Struct Mailing address of initial designated office
Mailing address of initial designated office
NORTH MIAMI BEACH, FL 33162
7. If limited partnership elects to be a limited liability limited partnership, check box 🗸

8. Name and business address of each gene Name:	ral partner: <u>Business Address:</u>
GATOR WATERVIEW, LLC	1595 NE 163RD STREET
L1-74412	NORTH MIAMI BEACH, FL 33162
	- FS 6
	JUL 28 CLAHAS
	SEE, FL
	ORIDA:
9. Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor more filed by the Florida Department of State.)	than 90 days after the date the document is
Signed this 27th day of	JULY , 2010 .
Signature of each general partner:	
James A. Goldsmith, Manager	
Certified Copy (optional): \$ 52	0.00 (\$965 Filing Fee and \$35 Registered Agent Fee) 2.50 3.75