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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

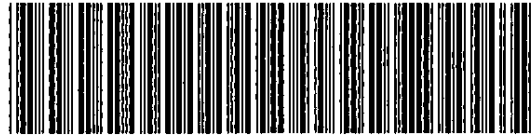
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TALLAHASSEE, FLORIDA



KITCHENS
KELLEY
GAYNES P.C.

Attorneys at Law
Eleven Piedmont Center - Suite 900
3495 Piedmont Road, N.E.
Atlanta, Georgia 30305
Telephone: 404-237-4100
Facsimile: 404-364-0126

December 13, 2012

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: SLDB Partners, LLLP
Our File No 6237.4501

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

Please find enclosed the following documents for SLDP Partners, LLLP, a Georgia limited liability limited partnership to convert to a Florida limited liability limited partnership:

1. Florida Department of State's Cover Letter;
2. Certificate of Conversion;
3. Certificate of Limited Partnership; and
4. Our firm's check in the amount of \$1,061.25 representing the filing fee and fee for a certificate of status.

Please return the Certificates to Joel S. Arogeti at the address provided on the attached Cover Letter.

Please give me a call at 404-237-4100 if you need any additional information. Thank you.

Yours very truly,

Kitchens Kelley Gaynes, P.C.

Kelly C. Moore
Paralegal

Enclosure

cc: Mark O. Hackner
Joel S. Arogeti, Esq.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SLDB Partners, LLP
Name of Resulting Florida Limited Partnership or Limited 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.

Please return all correspondence concerning this matter to:

Joel S. Arogeti
Contact Person
Kitchens Kelley Gaynes, P.C.
Firm/Company
3495 Piedmont Road, NE, 11 Piedmont Center, Suite 900
Address
Atlanta, Georgia 30305
City, State and Zip Code
jarogeti@kkgpc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard H. Bennett at (404) 237-4100
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$1,052.50 Filing Fees
(\$52.50 for Conversion
and \$1,000 - Certificate) Status
☒ \$1,061.25 Filing Fees
and Certificate of Status
☐ \$1,105.00 Filing Fees
and Certified Copy
☐ \$1,113.75 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

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TALLAHASSEE, FLORIDA

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

SLDB Partners, LLLP LTD.

(Enter Name of Other Business Entity)

B0500000444

2. The "Other Business Entity" is a Georgia limited liability 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 Georgia

(Enter state, or if a non-U.S. entity, the name of the country)

on October 26, 1999

(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**:

SLDB 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: _____
(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.)

6. The conversion is permitted by the applicable law(s) governing the other business entity and the other business entity complies with such law(s) in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

Signed this 5th day of December, 20 12.

Signature of Each General Partner Listed in Attached Certificate of Limited Partnership/Limited Liability Limited Partnership: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature: Mark O. Hackner Living Trust u/a/d 3/24/1995 By: 

Printed Name: Mark O. Hackner Title: Trustee

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Required Signature(s) on behalf of Other Business Entity: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]

Signature: Mark O. Hackner Living Trust u/a/d 3/24/1995 By: 

Printed Name: Mark O. Hackner Title: Trustee

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 an authorized person.

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 (Optional)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. SLDB 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 L.L.L.P.*

2. 6040 Winterthur Drive, Atlanta, Georgia 30328

Street address of initial designated office

3. Mark E. Miller

Name of Registered Agent for Service of Process

4. 611 W. Bay Street, Suite B, Tampa, Florida 33606

Florida street address for Registered Agent

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 and accept the obligations of my position as registered agent.*


Signature of Registered Agent

6. 6040 Winterthur Drive, Atlanta, Georgia 30328

Mailing address of initial designated office

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

8. Name and business address of each general partner:

Name:

Business Address:

Mark O. Hackner, as Trustee of the Mark O. Hackner Living Trust w/d 3/24/1995

6040 Winterthur Drive

Atlanta, GA 30328

9. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Signed this 5th day of December 2012

Signature of each general partner: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.



Mark O. Hackner Living Trust w/d 3/24/1995 By:
