(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: WIS-19418 R.A. Sign IGP not registered

Office Use Only



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JECRETARY OF STATE

2015 DEC 21 P 12: 17

FILED

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 9, 2015

PHILIP JOSEPHSON 2665 S. BAYSHORE DRIVE, PH2B MIAMI, FL 33133

SUBJECT: KENNEDYS AMERICAS LP

Ref. Number: W15000079418

We have received your document for KENNEDYS AMERICAS LP and your check(s) totaling \$1025.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 015A00025797

COVER LETTER

TO:	Registration S Division of C			
SUBJ	ECT: KENNED	YS LATIN AMERICA LI	.c	
2020			Limited Liability Comp	any
Limite		s of Conversion and fe mpany" into an "Other	• •	
Please	return all corre	espondence concernin	g this matter to:	
PHILI	PJOSEPHSON			
,		Contact Person		
STERI	ING BUSINESS	LAW		
		Firm/Company		
2665 S	. BAYSHORE DI			
	T 171 . 00100	Address		,
MIAM	I, FL 33133			
	C	ity, State and Zip Code		
PJOSE	PHSON@STERL	INGBUSINESSLAW.CO	М	
E-	mail address: (to	be used for future annual r	eport notification)	
For fu	rther information	on concerning this ma	tter, please call:	
PHILII	PJOSEPHSON	•	at (³⁰⁵) ²	85.7970
N	ame of Contact Pe	rson	_ \	Paytime Telephone Number
Enclos	sed is a check f	or the following amou	nt:	
= \$25.	00 Filing Fee	☐ \$30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status
STRE	ET ADDRES	S:	MAILING	G ADDRESS:
_	ration Section		Registratio	
	on of Corporati 1 Building	ons	Division o P. O. Box	f Corporations
	n Building Executive Cent	er Circle		e, FL 32314
	assee, FL 3230			,

CR2E106 (07/14)

Articles of Conversion

For

Florida Limited Liability Company

Into

"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:

KENNEDYS LATIN AMERICA LLC L1000006.387
Enter Name of Florida Limited Liability Company
2. The name of the "Converted or Other Business Entity" is:
KENNEDYS AMERICAS LP
Enter Name of "Converted or Other Business Entity"
3. The "Converted or Other Business Entity" is a LIMITED PARTNERSHIP (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity, the name of the country) (Date of organization, formation or incorporation)
and the formation document is attached (if applicable).

- 4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.
- 5. This conversion shall be effective in Florida on: THE FILING 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 of the conversion under the laws governing the "Other Business Entity.")

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:

		and mailing address of an office the Florida d and process served on the department pursuant to
Street .	Address:	
Mailin	g Address:	
app		ss Entity" has agreed to pay any members having ich such members are entitled under ss. 605.1006
Signed	this 3rd day	DECEMBER , 20 15
Signati	ure:	stund.
		ned by a Member or Authorized Representative
Printec	Name: PHILIP JOSEPHSON	Title:Title:
Fees:	Filing Fee: Certified Copy: Certificate of Status:	\$25.00 \$30.00 (Optional) \$5.00 (Optional)

6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":

Page 2 of 2

2015 DEC 21 P IZ: 13

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: KENNEDYS AMERICAS	S LP
Name of Florida Limited Part	nership or Limited Liability Limited Partnership
The enclosed Certificate of Limited Partners	hip and fees are submitted for filing.
Please return all correspondence concerning	this matter to:
PHILIP JOSEPHSON	
Contact Person	
STERLING BUSINESS LAW	
Firm/Company	
2665 S. BAYSHORE DRIVE, Ph	<u> 12B</u>
Address	
MIAMI, FL 33133	
City, State and Zip Code	····
PJOSEPHSON@STERLINGBUSINI E-mail address: (to be used for future annual re	ESSLAW.COM port notification)
For further information concerning this mat	ter, please call:
PHILIP JOSEPHSON	at (305) 285.7970
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount	nt:
\$1,000.00 Filing Fees \$1,008.75 Filing Fees and \$35 Registered Agent Fee) \$1,008.75 Filing Fees and Certificate of Status	\$1,052.50 Filing Fees and Certified Copy 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

CR2E030 (01/06)

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

KENNEDYS AMERICAS LP
(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.
1395 BRICKELL AVENUE, SUITE 610
(Street address of initial designated office)
MIAMI, FL 33131
3. STERLING BUSINESS LAW
(Name of Registered Agent for Service of Process)
4,2665 S. BAYSHORE DRIVE, PH2B
(Florida street address for Registered Agent)
MIAMI, FL 33133
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
6.1395 BRICKELL AVENUE, SUITE 610
(Mailing address of initial designated office)
MIAMI, FL 33131
7. If limited partnership elects to be a limited liability limited partnership, check box
Page 1 of 2 Page 2 of 2 Page 2 of 2 Page 2 of 2 Page 3 of 3 Page 3
P P P

	OF FENOLUSION AND ALLERY	
nnedys management holdings limi	25 FENCHURCH AVENU	JE
5000005615	LONDON, UK EC3M-5A	D UK
		
		
		,
Effective date, if other than the date o	filing:	
ective date cannot be prior to	or more than 90 days after the date the docur	ment is
fective date cannot be prior to d by the Florida Department o	or more than 90 days after the date the docu State.)	ment is
ffective date cannot be prior to ed by the Florida Department of gned this 3rd day gnature of each general partner ated herein are true. I/We am/arecument to the Department of S	or more than 90 days after the date the docu State.)	e facts
ed by the Florida Department of gned this 3rd day gnature of each general partner ated herein are true. I/We am/ar	or more than 90 days after the date the document.) of DECEMBER 2015 I/We submit this document and affirm that the aware that any false information submitted in	e facts
ffective date cannot be prior to ed by the Florida Department of gned this 3rd day gnature of each general partner ated herein are true. I/We am/ar accument to the Department of S 317.155, F.S.	or more than 90 days after the date the document. State.) of DECEMBER , 2015 I/We submit this document and affirm that the aware that any false information submitted in the constitutes a third degree felony as provide	e facts
ffective date cannot be prior to be dry the Florida Department of gned this 3rd day day gnature of each general partner ted herein are true. I/We am/ar cument to the Department of S	of DECEMBER 2015 I/We submit this document and affirm that the aware that any false information submitted in the constitutes a third degree felony as provided to \$1,000.00 (\$965 Filing Fee and \$35 Registered \$52.50 \$8.75	e facts n a ed for in
fective date cannot be prior to d by the Florida Department of med this 3rd day mature of each general partner ted herein are true. I/We am/ar nument to the Department of S 17.155, F.S.	of DECEMBER 2015 I/We submit this document and affirm that the aware that any false information submitted in the constitutes a third degree felony as provided \$1,000.00 (\$965 Filing Fee and \$35 Registered. \$52.50	e facts n a ed for in