

A170000000614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

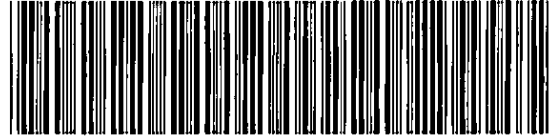
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/04/17--01013--026 **1105.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
DEC-4 PM 12:41

M. MILLIGAN
DEC 08 2017



20 South Clark Street
Suite 300
Chicago, IL 60603
DIRECT DIAL 312.582.1621
PHONE 312.580.1200 FAX 312.580.1201
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December 1, 2017

BY FEDERAL EXPRESS - PRIORITY OVERNIGHT

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

**Re: Conversion of AJBCA, LLLP, an Illinois Limited Liability Limited Partnership to
AJBCA, LLLP, a Florida Limited Liability Limited Partnership**

Dear Sir or Madam:

Enclosed for processing for **AJBCA, LLLP** to be known as **AJBCA, LLLP** (the "LLLP") are the following materials:

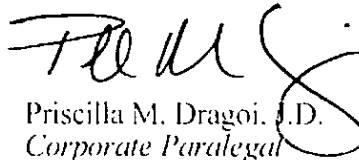
- (1) Cover Letter;
- (2) **duplicate executed originals** of the Certificate of Conversion;
- (3) **duplicate executed originals** of the Certificate of Limited Partnership; and
- (4) a check in the amount of **\$1,105** for the filing fees and the Certified Copy fee.

Please file an **original** of each document, date-stamp the **remaining original** with the file date and return the date-stamped originals and Certified Copy to me in the enclosed Federal Express envelope. The shipping label has already been completed to ensure that charges are billed to our account.

Please call me if you have any questions or require further information.

Very truly yours,

ROETZEL & ANDRESS, LPA


Priscilla M. Dragoi, J.D.
Corporate Paralegal

Enclosures

cc: David J. Hochman, Esq. (via e-mail, w/encls.)
12073458_1 137718.0001

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AJBCA, LLLP
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:

PRISCILLA M. DRAGOI
Contact Person
ROETZEL & ANDRESS
Firm/Company
20 S. CLARK ST., STE. 300
Address
CHICAGO, IL 60603
City, State and Zip Code
AJ494@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PRISCILLA M. DRAGOI at (312) 582-1621
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

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

Certificate of Conversion
For
"Other Business Organization"
Into

FILED
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DIVISION OF CORPORATIONS

17 DEC -4 PM 12: 41

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:

AJBCA, LLLP

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a 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 ILLINOIS
(Enter state, or if a non-U.S. entity, the name of the country)

on JULY 23, 2007
(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:

AJBCA, 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: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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 27 day of November, 2017.

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: [Signature]
Printed Name: ANTHONY J. UNRUH Title: TRUSTEE OF GEN. PARTNER
ANTHONY JOSEPH UNRUH REVOCABLE TRUST
U/A/D MAY 15, 2007
Signature: [Signature]
Printed Name: JANET M. UNRUH Title: TRUSTEE OF GEN. PARTNER
JANET MARY UNRUH REVOCABLE TRUST
U/A/D MAY 15, 2007
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: [Signature]
Printed Name: ANTHONY J. UNRUH Title: TRUSTEE OF GEN. PARTNER
ANTHONY JOSEPH UNRUH REVOCABLE TRUST
U/A/D MAY 15, 2007

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)

FILED
JANET MARY UNRUH
DIVISION OF CORPORATIONS
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CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 DEC -4 PM 12:41

1. AJBCA, LLLP

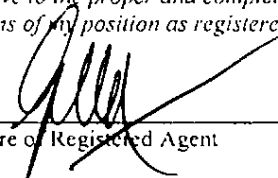
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

2. 23381 CARAWAY LAKES DR.
Street address of initial designated office
BONITA SPRINGS, FL 34135

3. ANTHONY J. UNRUH
Name of Registered Agent for Service of Process

4. 23381 CARAWAY LAKES DR.
Florida street address for Registered Agent
BONITA SPRINGS, FL 34135

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. 23381 CARAWAY LAKES DR.
Mailing address of initial designated office
BONITA SPRINGS, FL 34135

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:

ANTHONY J. UNRUH, TRUSTEE OF

23381 CARAWAY LAKES DR.

ANTHONY JOSEPH UNRUH
REVOCABLE TRUST U/A/D MAY 15, 2007

BONITA SPRINGS, FL 34135

JANET M. UNRUH, TRUSTEE OF

23381 CARAWAY LAKES DR.

JANET MARY UNRUH
REVOCABLE TUST U/A/D MAY 15, 2007

BONITA SPRINGS, FL 34135

Signed this 27 day of November, 2017

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.

