

L02000030340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

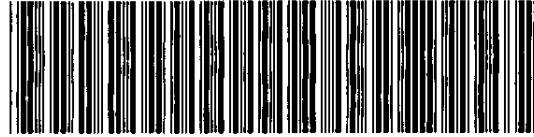
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2016 SEP 15 AM 8:20
TALLAHASSEE, FLORIDA

16 SEP 15 AM 8:21
TALLAHASSEE, FLORIDA

SEP 21 2015
J. HARRIS

Please file first

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 291313 7175508

AUTHORIZATION :

COST LIMIT : \$25.00

Spudde man

ORDER DATE : September 14, 2016

ORDER TIME : 12:14 PM

ORDER NO. : 291313-005

CUSTOMER NO: 7175508

DOMESTIC AMENDMENT FILING

NAME: LAKESHORE TAMARACK, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAKESHORE TAMARACK, LLC

Name of Florida Limited Liability Company

The enclosed Articles of Conversion and fee(s) are submitted to convert a Florida Limited Liability Company" into an "Other Business Entity" in accordance with s.605.1045, F.S.

Please return all correspondence concerning this matter to:

LINDSAY SAFFRIN, PARALEGAL

Contact Person

LEVENFELD PEARLSTEIN, LLC

Firm/Company

2 N. LASALLE ST., STE. 1300

Address

CHICAGO, IL 60602

City, State and Zip Code

GSHABAT@LAKESHOREMHC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LINDSAY SAFFRIN

Name of Contact Person

at (312) 476-7577

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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

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

CR2E106 (07/14)

291313



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 16, 2016

CSC
MELISSA ZENDER

SUBJECT: LAKESHORE TAMARACK, LLC
Ref. Number: L02000030340

RESUBMIT
Please give original
submission date as file date.

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

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Qualification in pending file.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 916A00019865

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16 SEP 20 AM 10:53

16 SEP 15 AM 8:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

LAKESHORE TAMARACK, LLC

Enter Name of Florida Limited Liability Company

2. The name of the "Converted or Other Business Entity" is:

LAKESHORE TAMARACK, LLC

Enter Name of "Converted or Other Business Entity"

3. The "Converted or Other Business Entity" is a **limited liability company**
(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 **Delaware**
(Enter state, or if a non-U.S. entity, the name of the country)
on **September 14**, 2016
(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 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.

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TALLAHASSEE, FLORIDA
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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":

a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address: 8800 N. Bronx Ave., 2nd Floor
Skokie, IL 60077

Mailing Address: 8800 N. Bronx Ave., 2nd Floor
Skokie, IL 60077

7. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 14 day of September, 2016

Signature: _____

Must be signed by a Member or Authorized Representative

Printed Name: Joseph I. Wolf Title: Authorized Representative of Member

Fees: Filing Fee: \$25.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

16 SEP 15 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FL 32304