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(((H06000130277 3)))

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : TRUMAN J. COSTELLO, P.A.

Account Number : I20020000024 = (239)939**-**2222 Phone Fax Number : (239)939-2280

FLORIDA/FOREIGN LIMITED LIABILITY

Spanish Wells Joint Venture, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

J. BRYAN MAY 1 1 2006

SECTION TARY OF STATE
DIVISION OF CORPORATIONS
OF MAY 10 PM 1: 20

Certificate of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

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

Spanish Wells Joint Venture

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a general partnership
(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on January 1, 1978
(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

Not Applicable

4. The name of the Florida Limited Liability Company as set forth in the attached

4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Spanish Wells Joint Venture, LLC

(Enter Name of Florida Limited Liability Company)

Page 1 of 2

5. If not effective on the date of filing, enter the effective date:	May	10,	2006
(The effective date: 1) cannot be prior to nor more than 90	days	after	tbe date this
document is filed by the Florida Department of State; AND effective date listed in the attached Articles of Organization	•		
listed therein.)			

Signed this 10th day of May	2006
Signature of Authorized Person:	Postello
Signature of Authorized Colstan.	
Printed Name: Truman J. Costello	Title: Special Counsel

Fees:

Certificate of Conversion: \$25.00

Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional) \$5.00 (Optional) Certificate of Status:

Page 2 of 2

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ORGANIZATION FO	on FLORIDA LIMITED LIABILITY COMBANTS any is: 7, "Limited Company" or their abbreviation "LLC," or "L.C.,")
1	是 等
	antrin.
Limited Lisbinity Comp	any is:
	至
Joint Venture, LLC	
ards "Limited Liability Company	, "Limited Company" or their abbreviation "LLC," or "L.C.,")
Address:	`
	f the principal office of the Limited Liability Company is
	}
: Address:	Mailing Address:
Delvo #8	
Company cannot serve as its over a strain.)	vn Registered Agent. You must designate an individual or another
e Florida street address (of the registered agent are:
Ned F Dewhirst	
700 21 2000	Name
24880 Burnt Pine	Drive #8
4.4	treet address (P.O. Box NOT acceptable)
Bonita Springs	FL 34134
	÷
City	, State, and Zip
	Address: tess and street address of Address: Address: Drive #8 L 34134 Registered Agent, Regional Company cannot serve as its own active Florida registration.) Florida street address of Ned E. Dewhirst 24880 Burnt Pine

(CONTINUED) Page 1 of 2

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(((H06000130277 3)))

<u>Title:</u> "MGR" = Manag "MGRM" = Man		Name and Address:	
"MGR"		David A. McArdle	
		4501 E. Main Street	_
		St. Charles, IL 60174	
			<u> </u>
	. 2		_
LEV: Effective	date, if other than the	date of filing: (OPT	ION.
LE V: Effective fective date is lis days after the da	date, if other than the detect, the date must be ate of filing.)	date of filing: (OPT specific and cannot be more than five busines	IONA
LE V: Effective of the control of th	date, if other than the deted, the date must be ate of filing.)	date of filing: (OPT specific and cannot be more than five business.) Little To an authorized representative of a member.	IONA
(Use attachment LE V: Effective fective date is lis days after the di	date, if other than the deted, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with sec	r or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	IONA
LE V: Effective of the control of th	date, if other than the deted, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with second this document constituted that the facts stated by Truman J. Costello	r or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)	IONA

Page 2 of 2