L07000//3/53

(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:
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2001 NOV -6 P 2: 34
ECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SOUTHWEST SHORE	ES, LLC
(Name of Resulting	g Florida Limited Company)
The enclosed Certificate of Conversion, A convert an "Other Business Entity" into a cordance with s. 608.439, F.S.	rticles of Organization, and fees are submitted to "Florida Limited Liability Company" in
Please return all correspondence concernir	ng this matter to:
JOSEPH PJ. VRABEL, ESQ.	
(Contact Person)	20 TAL
CAPITAL RISK MANAGEMEN	TINC.
(Firm/Company)	T INC. SECRETARY LLAHASSE
1661 WORCESTER RD, STE	TARY OF STASSEE, FLO
(Address)	D D
FRAMINGHAM, MA 01701	
(City, State and Zip Code)	TE 34
For further information concerning this ma	atter, please call:
JOSEPH PJ VRABEL	at (508) 665-4800
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amo	unt:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	\$180.00 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

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> 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: SOUTHWEST SHORES, LLC
(Enter Name of Other Business Entity)
2. The "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.
first organized, formed or incorporated under the laws of MASSACHUSETTS —— (Enter state, or if a non-U.S. entity, the name of the country)
on 5/31/2001 (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:
MASSACHUSETTS
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SOUTHWEST SHORES, LLC
(Enter Name of Florida Limited Liability Company)

Page 1 of 2

5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor m document is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days afte State; <u>AND</u> 2) must	be the same a	s the
Signed this	20_07		
Signature of Authorized Person:			
Printed Name: JOHN F. BLAIS, JR. Title	MANAGER		
Fees: Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	2001 NOV -6 P 2: 31 SECRETARY OF STATE TALLAHASSEE, FLORID,	

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:

SOUTHWEST SHORES, LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Ad	aress:	Walling Add	ress:		
John F. Blais, Jr.		John F. Blais, Jг.			
9839 Red Reef Court		9839 Red Reef C	Court		_
Ft. Myers Florida 33919		Ft. Myers Florida	33919		_
Signature: (The Limited Liability Comindividual or another business entity with an act	_	n Registered Agent. You mu	ECOMATE TARY		's T
9	9839 Red Reef	Name Court	TIE A	같	
]	Florida street address	(P.O. Box NOT acce	ptable)		
F	Fort Myers	FL			
_	City	, State, and Zip		-	

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	John F. Blais, Jr. 9839 Red Reef Court
	Ft. Myers Florida 33919
MGRM	Rochelle Blais
	9839 Red Reef Court
	Ft. Myers Florida 33919
	(Use attachment if hecessary) The data of filing:
LE V: Effective date, if other than	n the date of filing: S₹ 🖔

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

John F. Blais, Jr.

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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