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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
(Only) States Elph Holle II)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
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· COVER LETTER

, TO: Registration Section Division of Corporations	
. SUBJECT: The Fine Arts Conse	rvancy, LLC ng Florida Limited Company)
	Articles of Organization, and fees are submitted to "Florida Limited Liability Company" in
Please return all correspondence concern	ing this matter to:
Elaine D. Lewis (Contact Person)	
(Firm/Company) 5840 Corporate Way, Suite 11 (Address) West Palm Beach, FL 33407 (City, State and Zip Code	
For further information concerning this n	natter, please call:
Joshua M. Fleming, Esq. (Name of Contact Person)	at (561) 622-2700 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following ame	ount:
✓\$150.00 Filing Fees (\$25 for Conversion &\$125 for Articles of Organization) \$\square{1}\$	\$\int \$\sum
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

FILED

Certificate of Conversion

For

"Other Business Entity"

Into

08 MAY 12 PM 1:43

SECRETARY OF STATE TALLAHASSEE FLORIDA

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: The Fine Arts Conservancy, Inc. P98-94917
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation
(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 11/10/1998
(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:
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
The Fine Arts Conservancy, LLC
(Enter Name of Florida Limited Liability Company)

Page 1 of 2

5. If not effective on the date of filing, enter the e (The effective date: 1) cannot be prior to nor n document is filed by the Florida Department of effective date listed in the attached Articles of (listed therein.)	nore than 90 days after the date this f State; <u>AND</u> 2) must be the same as the
Signed this Openday of 2, 200	<u>~</u> 568
Signature of Authorized Person	
Printed Name: Elaine D. Lewis Titl	e: President
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
The Fine Arts Conservancy, LLC (Must end with the words "Limited Liability Company," the abb	previation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of the pri Liability Company is:	ncipal office of the Limited
Principal Office Address:	Mailing Address:
5840 Corporate Way Suite 110 West Palm Beach, FL 33407	5840 Corporate Way Suite 110 West Palm Beach, FL 33407
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Registe individual or another business entity with an active Florida registration.)	ered Agent. You must designate an
The name and the Florida street address of the respective Spiegel & Utrera, P.A.	sgistered agent are.
Name 1840 Coral Way	FLORIDA FLORIDA
Florida street address (P.O. Miami	FI_ 33415
City, State	, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

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:

W (CD) 1 1 1	Name and Address:
"MGR" = Manager	m kou
"MGRM" = Managing Mer	noer
MGRM	Elaine D. Lewis
	5840 Corporate Way, Suite 110
	West Palm Beach, FL 33407
MGRM	Gordon Lewis
	5840 Corporate Way, Suite 110
	West Palm Beach, FL 33407
	
	(Lice attachment it necessary)
	(Use attachment if necessary)
IFV. Effective date if oth	•
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NAL)	ner than the date of filing:
NAL) ffective date is listed, the d	late must be specific and cannot be more than five
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NAL) ffective date is listed, the days prior to or 90 days a REQUIRED SIGNATUR Signature of a member	late must be specific and cannot be more than five after the date of filing.) E: Tor an authorized representative of a member.
NAL) ffective date is listed, the days prior to or 90 days a REQUIRED SIGNATUR Signature of a member (In accordance with se	late must be specific and cannot be more than five after the date of filing.) E: Tor an authorized representative of a member.
MAL) ffective date is listed, the design of this document consti	late must be specific and cannot be more than five after the date of filing.) E: Tor an authorized representative of a member.
MAL) ffective date is listed, the design of this document consti	late must be specific and cannot be more than five after the date of filing.) E: OR AN

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)