114000050453

(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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2014 MAR 26 AM DE LA SCORETARY OF STATE

MAR 27 2014 T CLINE February 4, 2014

GREG SILPE 2500 SOUTH OCEAN BLVD., SUITE 2B1 PALM BEACH, FL 33480

SUBJECT: TCI CHEESE COMPANY, LLLP

Ref. Number: A13000000187

We have received your document for TCI CHEESE COMPANY, LLLP and your check(s) totaling \$155.00. 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 filings its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Tammi Cline Regulatory Specialist II

Letter Number: 814A00002459.

COVER LETTER

SUBJECT:	TCI	CHEESE	COMPAN	۲,	LLC	
		(Name of Resul	ting Florida Limite	d Company	')	_
The enclosed Certific Business Entity" into						d to convert an "Other .1045, F.S.
Please return all corr	espondence (concerning this r	natter to:			
GRE	E SILP	£				
	(Contact Pe	rson)				
	(Firm/Comp	pany)				
2500 Sout	'H OCEA	N BLVD. S	UITE 28.1			
	(Addres	•				
PALM B	EACH,	FL 33	480			
(City, State and	Zip Code)				
GSILPE	@ com	CAST , NE	7			
E-mail Address: (to l						
For further informati	on concernir	ng this matter, pl	ease call:			
CREC	SILPE	at ((Area Code) (Day	305 1	898	
(Name of Cont	act Person)		(Area Code) (Day	time Telep	hone Number)	_
Enclosed is a check	for the follow	ving amount:				
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 F and Certifica Status		30.00 Filing Fees ertified Copy	Certified	00 Filing Fees, Copy, and te of Status	
STREET ADDRES	S:		MAILING A	DDRES	S:	
Registration Section			Registration !			
Division of Corporat Clifton Building	ions		Division of C P. O. Box 63:	-	ns	
2661 Executive Cen			Tallahassee, l		ļ ·	
Tallahassee, FL 323	01					

INHS11 (01/14)

TO: Registration Section

Division of Corporations

TCI Cheese Company, LLLP

2500 S. Ocean Blvd., Suite 2B1 Palm Beach, FL 33480 (860) 805-1698

February 25, 2014

Florida Department of State Division of Corporations Attn. Tammi Cline P.O. Box 6327 Tallahassee, FL 32314

Re: Ref.# A13000000187 TCI Cheese Company, LLLP

Dear Ms. Cline,

I have received your letter dated February 4, 2014, in which you denied our request for a conversion based on s.605.0212(9) and s.605.0212(10).

However, based on conversations with council, I respectfully ask that you review your decision since I believe that we are, in fact, compliant with these sections of the statutes. In order not to be "current", as required by the statutes, the deadline for the filing for the present year would have to have expired. It has not. Therefore, we are current for this year. It is our intention to convert, and then file our report all before the May 1, 2014 deadline for filing. Thereby remaining current and complaint in all material respects.

I have enclosed our original documentation and a copy of your February 4, 2014 for your convenience and consideration.

If you have any further questions please feel free to contact me at (860) 805-1698.

Thank you and regards,

TC Cheese Company, LLLP

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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of CTC CHEESE COMPANY, LLLP 113-18.	Conversion	is:
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a LIMITED LIABILITY LIMITED PARTNERSHIP (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)		
First organized, formed or incorporated under the laws of FLORIDA		
on 4/8/2013 (Enter state, or if a non-U.S. entity, the name of the date of organization, formation or incorporation)	e country)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of O	rganizatioi	n:
TCI CHEESE COMPANY, LLC		
(Enter Name of Florida Limited Liability Company)		
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days date this document is filed by the Florida Department of State; AND 2) must be the same as	the effecti	ve.
date listed in the attached Articles of Organization, if an effective date is listed therein.)		<u>.</u>
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.		26 ***
	71.0	<u> </u>

Page 1 of 2

,				
Signed this 14th day of JANUARY	20.14			
Signature of Authorized Representative of Limit	ted Liability Company:			
Signature of Authorized Representative: Printed Name: PAVL BLAKELEY	Title: PARTMER DIRECTOR			
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]			
Signature: Paul Brown	751 000 d G			
Printed Name: PAUL BLAVELEY	THIE: YAK TOPIC			
Signature:	Title: PARTMER			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature: Printed Name:				
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer.			
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:			
All others: Signature of an authorized person.		200 5-21	2014 NAR	4 (4
Fees:		ا الجيد بن	AR 26	€
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		ह्याह्य । स्थार	# LI W. W

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Ta
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
2500 SOUTH OCEAN BLVD, SUITE 2BI SAFTE
PALM BEACH FL 33480

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
GREG SILPE
Name
2500 SOUTH OCEAN BLVD, SUITE 2B1
Florida street address (P.O. Box NOT acceptable)
PALTI BEACH FL 33480 City Zip
City 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 605, F.S.
Registered Agent's Signature (REQUIRED)
(CONTINUED) Page 1 of 2

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
"MAGD" - Managar	
	COSC SUDE
AMBR	GREG SILPE
	2500 SOUTH OCEAN BLUD SUITE 2B PALM BEACH FL 33480
	- THEIT DEACH 1 = 33700
AMBR	PAUL BLAKELEY
	23 BEACH PLUM LANE BOX 1923
	ORLEANS MA 02653
	-
LE V: Effective date, if other than the	ne date of filing: (OPTIONAL)
LE V: Effective date, if other than the factive date is listed, the date must days after the date of filing.) LE VI: Other provisions, if any.	ne date of filing: (OPTIONAL) t be specific and cannot be more than five business days
Tective date is listed, the date must days after the date of filing.) LE VI: Other provisions, if any.	ne date of filing: (OPTIONAL) t be specific and cannot be more than five business days
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Tective date is listed, the date must days after the date of filing.) LE VI: Other provisions, if any.	ne date of filing: (OPTIONAL) t be specific and cannot be more than five business days Paul Zul
Sective date is listed, the date must days after the date of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membra accordance with section 605.0203 estitutes an affirmation under the period of the section of the period of the section of the section of the period of the section of the sec	er or an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document of authorized representative of a member. (2) (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
Sective date is listed, the date must days after the date of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member accordance with section 605.0203 astitutes an affirmation under the pern aware that any false information settitutes a third degree felony as pro-	er or an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document? authorized representative of a member. (1) (c), Florida Statutes, the execution of this document? authorited in a document to the Department of State

ARTICLE IV-

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)
Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent