

L15000100340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

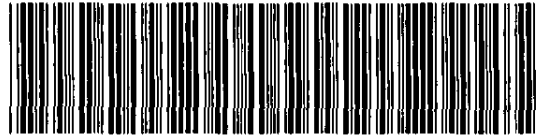
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

JUN 10 2015
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06/05/15--01004--007 **150.00

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATE REGISTRATION
FILED
15 JUN -5 AM 10:18 15 JUN -4 PM 2:25
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TO ACKNOWLEDGE
SUFFICIENCY OF FILING



CT Corporation

515 East Park Avenue
Tallahassee, FL 32301

850 558 1930 tel
855 637 1628 fax
www.ctcorporation.com

June 4, 2015

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

FILED
15 JUN -4 PM 2:25
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA

Re: Order #: 9576642 SO
Customer Reference 1: PSN 31971-73796
Customer Reference 2:

Dear Department of State, Florida :

Please obtain the following:

K2R Enterprises (FL)
Conversion
Florida

K2R Enterprises, LLC (FL)
Formation
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092 .

Thank you very much for your help.

Sincerely,

Connie R Bryan
Senior Fulfillment Specialist
Connie.Bryan@wolterskluwer.com



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 8, 2015

CT

SUBJECT: K2R ENTERPRISES, LLC
Ref. Number: W15000039680

RE-SUBMIT
Please retain original filing
date of submission 6/4

We have received your document for K2R ENTERPRISES, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order to file for conversion, the General Partnership must first be registered with the Secretary of State. Please correct your document accordingly.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Andy Dunlap
Senior Section Administrator

Letter Number: 915A00011975

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
15 JUN -9 AM 11:38
NOT ATTACHED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K2R Enterprises, LLC

(Name of Resulting Florida Limited Company)

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

Please return all correspondence concerning this matter to:

Michael Klupchak

(Contact Person)

K2R Enterprises, LLC

(Firm/Company)

5220 North Magnolia Avenue

(Address)

Chicago, Illinois 60640

(City, State and Zip Code)

mklupchak@lanermuchin.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Michael Klupchak

(Name of Contact Person)

at (312) 519-5012

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

\$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

\$185.00 Filing Fees,
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

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

The Articles 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 the Articles of Conversion is:
K2R Enterprises

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a general 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
(Enter state, or if a non-U.S. entity, the name of the country)

on _____
(date of organization, formation or incorporation)

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

K2R Enterprises, 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 after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

5. The plan of conversion has been approved in accordance with all applicable statutes.

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15 JUN -4 PM 2:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Signed this 18th day of MAY 2015

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]
Printed Name: Michael Klupchak Title: Authorized Representative

Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: [Signature]
Printed Name: Michael Klupchak Title: General Partner

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of **ALL** General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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15 JUN -14 PM 2:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

K2R Enterprises, LLC

(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:

5220 North Magnolia Avenue
Chicago, Illinois 60640

5220 North Magnolia Avenue
Chicago, Illinois 60640

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:

Taft Service Solutions Corp.

Name

6488 Indigo Bunting Place

Florida street address (P.O. Box **NOT** acceptable)

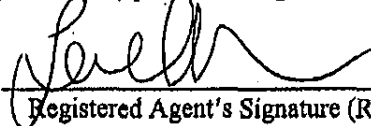
Lakewood Ranch

FL 34202

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)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

15 JUN -4 PM 2:26

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member
"MGR" = Manager
MGR

Name and Address:

Michael Klupchak
5220 North Magnolia Avenue
Chicago, Illinois 60640

MGR

Thomas Kublsak
130 Big Oaks Lane
Niceville, Florida 32578

MGR

Lawrence Roesler
120 Troy Circle
Fort Walton Beach, Florida 32518

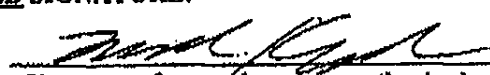
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15 JUN -4 PM 2:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Michael Klupchak, Authorized Representative
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)