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(Re	equestor's Name)	
(Ad	dress)	<i>(</i>
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	_
Certified Copies	_ Certificates	s of Status
Special Instructions to		





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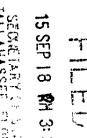
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	•	COVER LETTER	(
TO: Registration Division of C			·	
SUBJECT: SBBB, L	LC			
Sobole 1.	(Name	of Resulting Florida Limite	ed Company)	
			nd fees are submitted to co ccordance with s. 605.104	
Please return all corr	espondence concernin	g this matter to:		
Scton Hengesbach, Esq.				
	(Contact Person)			
Hengesbach & Hengesb	ach, P.A.			
	(Firm/Company)			
5438 Spring Hill Drive				
	(Address)			
Spring Hill, FL 34606				
	City, State and Zip Code)			
seton@naturecoastlaw.c	om			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
Seton Hengesbach		at (352) 683-	1963	
(Name of Conta	act Person)		vtime Telephone Number)	
Enclosed is a check	for the following amou	nt:		15 S
\$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	EP 18 29 3
STREET ADDRES Registration Section	S:	MAILING A Registration		3. Sept. 19. Sep

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



HENGESBACH & HENGESBACH, P.A.

ATTÓRNEYS AND COUNSELORS AT LAW

SEAN E. HENGESBACH SETON T. HENGESBACH

WAYNE R. COULTER Of Counsel

SPRING HILL OFFICE 5438 SPRING HILL DRIVE SPRING HILL, FLORIDA 34606 PHONE: (352) 683-1963 FAX: (352) 683-3847 TRINITY OFFICE 8221 STATE ROAD 54 TRINITY, FLORIDA 34655 PHONE: (727) 835-5048

REPLY TO SPRING HILL

E-MAIL: INFO@NATURECOASTLAW.COM WWW.NATURECOASTLAW.COM

September 16, 2015

VIA FED-EX OVERNIGHT

Division of Corporations Florida Department of State Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

IN RE:

SBBB, LTD.

REFERENCE NUMBER: A03000001579

Dear Sir/Madam:

Enclosed herewith please find a Certificate of Conversion in regards to the above-referenced matter.

I have enclosed a postage paid envelope for the return of the filed documents. If you have any questions or concerns please contact our office at any time.

Thank you.

Very truly yours,

SETONZ HENGESBACH, ESQUIRE

STH/aml Enclosure



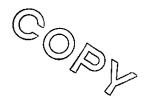
FLORIDA DEPARTMENT OF STATE Division of Corporations

July 24, 2015

SETON HENGESBACH, ESQ HENGESBACH & HENGESBACH, P.A. 5438 SPRING HILL DRIVE SPRING HILL, FL 34606

SUBJECT: SBBB, LTD.

Ref. Number: A03000001579



We have received your document for SBBB, LTD. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

If we have had no written response within 60 days of this letter, we will consider your document abandoned.

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

New Filing Section.

Letter Number: 715A00015627

Articles of Conversion

For

<u>"Other Business Entity"</u>

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: 403 -1570 SBBB, LTD. (Enter Name of Other Business Entity) limited partnership 2. The "Other Business Entity" is a (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) 11/03/2003 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: SBBB, 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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Page 1 of 2

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

Signed this 19th day of August			
Signature of Authorized Representative of Limit	ted Liability Combany:		
Signature of Authorized Representative: Printed Name: Paul Bernard	Title: Manager		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]		
Signature: 1 aul Communication of the signature of the si			
Printed Name: Paul Bernard	Title: President		
Signature:Printed Name:	Title		
Signature: Printed Name:	_Title:		
Signature:Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature: Printed Name:	Title		
	THE.		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Clif Directors or Officers have not been selected, an Inc			
If Florida General Partnership or Limited Liabilit	•	Z g :	ii ii
Signature of one General Partner.			T B
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:	ASS ASS	<u> </u>
Signatures of ALL General Partners.	The state of the s	· naigh	19 . [1]
All others: Signature of an authorized person.		100 km 100 km 100 km 100 km 100 km	ત હુ ડુ
Fees:		×	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00(Optional)	a promote a Salaratza taria	特殊型 (5)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	u ia.	
The name of the Limited Liability Company	y is:	
SBBB, LLC		
	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
6006 Siesta Lane	P.O. Box 927	
Port Richey, FL 34668	Port Richey, FL 34673	
ARTICLE III - Registered Agent, Registe The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)		
The name and the Florida street address of t	the registered agent are:	
Seton T. Hengesbach, Esq.		
N	lame	
5438 Spring Hill Drive		
	P.O. Box NOT acceptable)	
Spring Hill	FI 34606	
City	Zip	
•	·	
Having been named as registered agent ar liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and comple accept the obligations of my position as	ed in this certificate, I hereby accept apacity. I further agree to comply wi lete performance of my duties, and I d	the appointment as th the provisions of all am familiar with and
/4/		15 S
Registered Agent's S	Signature (REQUIRED)	SEP 18
	ΓΙΝUED) ge 1 of 2	8 T
Lag	C 1 UI 2	34 55

"AN	<u>e:</u> 1BR" = Authoriz	ed Member	Name and Address:	
"IVIC MGR	GR" = Manager		Paul Bernard	
			P.O. Box 927	
			Port Richey, FL 34673	
MGR	<u> </u>		Timothy Smock	
			P.O. Box 927	· · · · · · · · · · · · · · · · · · ·
			Port Richey, FL 34673	
(Use	attachment if ne	ecessary)		
effecti 90 day: If the da	ive date is listed s after the date on the inserted in this bl	, the date must be of filing.)	ate of filing: specific and cannot be more the applicable statutory filing requirements. ecords.	an five business days p

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

(In accordance with section 605.0205 (3), 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.)

Paul Bernard

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)
Page 2 of 2