L1500017/966

(Re	equestor's Name)	<u></u>
(Ad	dress)	**************************************
— (Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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10/05/15--01019--015 **150.00

DIVISION OF CORPORATION

2 10/09/15

COVER LETTER

Division of C			
SUBJECT: Kienast P.	roperties, LLC		
		of Resulting Florida Limite	d Company)
			nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:	
Curt Kienast			
-	(Contact Person)		
·	(Firm/Company)	<u></u>	
10517 San Travaso Drive			
	(Address)		
Tampa FL 33647			
((City, State and Zip Code)		
kienastc@icloud.com			
E-mail Address: (to b	e used for future annual re	port notifications)	
For further information	on concerning this ma	tter, please call:	
Curt Kienast		_at (518)253-9	9152
(Name of Conta	ct Person)	(Area Code) (Day	ytime Telephone Number)
Enclosed is a check f	or the following amou	int:	
\$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	S:	MAILING A	
Registration Section		Registration	
Division of Corporat	ions	Division of C	
Clifton Building 2661 Executive Cent	er Circle	P. O. Box 63 Tallahassee,	
2001 DACCULIVE CELL	or Oncio	i arianassee,	1 D DDJ 17

Tallahassee, FL 32301

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: Kienast Properties, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a 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 New York
8/20/2004 (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:
Kienast Properties, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: filing 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.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

SECRETARY OF STATE OIVISION OF CORPORATION:

Signed this 21	st day of September	20 15
Signature of	Authorized Representative of Li	nited Liability Company:
Signature of A	authorized Representative:	
	Curt Kienast	
Printed Name.	Curt Richast	Title. Managing ration
		[See below for required signature(s)]
Signature:	Sherly Jenses	
Printed Name:	Shirley Jensen	Title: General Partner
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		77.1
Printed Name:		Title:
Cianatura		
Printed Name		Title:
Trinca Ivanie.		
Signature:		
		Title:
•		
If Florida Cor	poration:	
Signature of C	hairman, Vice Chairman, Director, o	or Officer.
If Directors or	Officers have not been selected, an	Incorporator must sign.
	<u>ieral Partnership or Limited Liab</u>	<u>ility Partnership:</u>
Signature of or	ne General Partner.	
If Florida Lin	nited Partnership or Limited Liab	ility I imited Dortnership
	ALL General Partners.	mty Limited Farthership.
Signatures of E	TLE General Partiers.	
All others:		
	n authorized person.	
D		
Fees:		
Article	es of Conversion:	\$25.00
	or Florida Articles of Organization	
	ed Copy:	\$30.00 (Optional)
	cate of Status:	\$5.00 (Optional)
		· •

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Kienast Properties, LLC	
	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4469 Ortona Lane	10517 San Travso Drive
Wesley Chapel, FL 33543	Tampa, FL 33647
(The Limited Liability Company cannot serve as i business entity with an active Florida registration	
(The Limited Liability Company cannot serve as i business entity with an active Florida registration) The name and the Florida street addresses	ts own Registered Agent. You must designate an individual or another a.)
(The Limited Liability Company cannot serve as i business entity with an active Florida registration	ts own Registered Agent. You must designate an individual or another a.) ess of the registered agent are:
(The Limited Liability Company cannot serve as i business entity with an active Florida registration.) The name and the Florida street addresses.	ts own Registered Agent. You must designate an individual or another a.)
(The Limited Liability Company cannot serve as i business entity with an active Florida registration.) The name and the Florida street address Shirley Jensen. 10517 San Travaso E.	ts own Registered Agent. You must designate an individual or another (a.) ess of the registered agent are: Name
(The Limited Liability Company cannot serve as i business entity with an active Florida registration.) The name and the Florida street address Shirley Jensen. 10517 San Travaso E.	ts own Registered Agent. You must designate an individual or another a.) ess of the registered agent are: Name
(The Limited Liability Company cannot serve as i business entity with an active Florida registration.) The name and the Florida street address Shirley Jensen. 10517 San Travaso E.	nts own Registered Agent. You must designate an individual or another a.) ess of the registered agent are: Name Orive dress (P.O. Box NOT acceptable) FL 33647

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE DIVISION OF CORPORATION:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Meml	per
"MGR" = Manager	
MGR	Curt Kienast
	4469 Ortona Lane
	Wesley Chapel, FL 33543
AMBR	Shirley Jensen
	10517 San Travaso Drive
	Tampa, FL 33647
	ü
	©
ffective date is listed, the date	than the date of filing: filing date
LE V: Effective date, if other ffective date is listed, the date days after the date of filing.)	e must be specific and cannot be more than five business do not meet the applicable statutory filing requirements, this date will not be lost State's records.
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LE V: Effective date, if other fective date is listed, the date days after the date of filing.) the date inserted in this block does not seffective date on the Department LE VI: Other provisions, if any EEQUIRED SIGNATURE: Signature of a rather than a management of the document is executed any false.	nember or an authorized representative of a member. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. The information submitted in a document to the Department of State.
LE V: Effective date, if other fective date is listed, the date days after the date of filing.) the date inserted in this block does not seffective date on the Department. LE VI: Other provisions, if any signature of a result of the department of a result of the date of	nember or an authorized representative of a member. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. The information submitted in a document to the Department of State.

Page 2 of 2

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

ARTICLE IV-