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| (Re | equestor's Name) | |
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| (Ac | ddress) | |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | : #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Ві | ısiness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: Registration Section Division of Corpo | | | | |
|--|--|--|---------|---|
| SUBJECT: HAMMERH | HEAD FRED'S, LL | С | | |
| | (Name of | Resulting Florida | Limited | Company) |
| The enclosed Articles of G Business Entity" into a "F | Conversion, Articles Florida Limited Liab | s of Organizatio | on, and | fees are submitted to convert an "Other cordance with s. 605.1045, F.S. |
| Please return all correspon | ndence concerning t | his matter to: | | |
| LAURA C. PYNE, ESQ | λ | | | |
| , | ontact Person) | | | • |
| PYNE LAW GROUP, P | ···· | | | · |
| • | irm/Company) | | | |
| 2309 FRANKFORD AV | · · · · · · · · · · · · · · · · · · · | | | |
| | (Address) | | | |
| PANAMA CITY, FL 32 | 2405 | • | | |
| (City, S | State and Zip Code) | | | |
| E-mail Address: (to be used | d for future annual repor | rt notifications) | | |
| For further information co | oncerning this matte | r, please call: | | • |
| LAURA C. PYNE | 8 | at (850 | 215-9 | 090 |
| (Name of Contact Per | rson) | (Area Code) | (Daytir | me Telephone Number) |
| Enclosed is a check for the | e following amount | : | | |
| | Certificate of | □\$180.00 Filing I and Certified Copy | / (| □\$185.00 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRESS: | | MAILI | NG AD | DDRESS: |

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

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 10, 2015

LAURA C. PYNE, ESQ. PYNE LAW GROUP, P.A. 2309 FRANKFORD AVENUE, SUITE A PANAMA CIRTY, FL 32405 US

SUBJECT: HAMMERHEAD FRED'S LLC

Ref. Number: W15000079790

Upon receipt of your letter and/or check(s) totaling \$155.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

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

Letter Number: 415A00025898

Tina D Cannon Regulatory Specialist II

www.sunbiz.org

Disision of Commentions D.O. DOV 6907 (Ballaharras Florida 9091

Articles of Conversion For "Other Business Entity" Into

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 DEC 22 AM | |: 02

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.

Florida Limited Liability Company

| 1. The name of the "Other Business Entity" immediat HAMMERHEAD FRED'S, INC. | ely prior to the filing of the Articles of Conversion is: |
|---|---|
| (Enter Name of Other Busi | ness Entity) |
| 2. The "Other Business Entity" is a CORPORATON | <u> </u> |
| (Enter entity type. Ex | ample: corporation, limited partnership, o, common law or business trust, etc.) |
| First organized, formed or incorporated under the laws | of FLORIDA |
| FEBRUARY 14, 1996 | (Enter state, or if a non-U.S. entity, the name of the country) |
| (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company | y as set forth in the attached Articles of Organization: |
| HAMMERHEAD FRED'S, LLC | |
| (Enter Name of Florida Limited Lia | bility Company) |
| 4. If not effective on the date of filing, enter the effect (The effective date: 1) cannot be prior to date of redate this document is filed by the Florida Departmedate listed in the attached Articles of Organization, | ceipt or filed date nor more than 90 days after the ent of State; <u>AND</u> 2) must be the same as the effective |
| 5. The plan of conversion has been approved in accord | ance with ss. 605.1041-605.1046. |

Page 1 of 2

15 DEC 22 AM 11:02

| Signed this 13th day of Nou | 20 <u>15</u> . | | | |
|---|--|--|--|--|
| Signature of Authorized Representative of Limited Liability Company: | | | | |
| Signature of Authorized Representative: Printed Name: SAMUEL N. BENNETT | Title: MANAGER | | | |
| Signature(s) on behalf of Other Business Entity: | / | | | |
| Similar SIM LOV | | | | |
| Printed Name: SAMUEL N. BENNETT | Title: Director | | | |
| Signature: ALV Printed Name: MICHAEL P. BENNETT | Title: Director | | | |
| Signature: | 11 Charles and the control of the co | | | |
| Printed Name: | Title; | | | |
| Printed Name: | Title; | | | |
| Signature: Printed Name: | Title: | | | |
| Signature: | | | | |
| Printed Name: | Inte. | | | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. | | | | |
| If Florida General Partnership or Limited Linbilit Signature of one General Partner. | y Partnership: | | | |
| 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 \$125.00 | | | |
| Fees for Florida Articles of Organization: Certified Copy: | -\$125.00 -\$30.00 (Optional) | | | |
| Certificate of Status: | \$5.00 (Optional) | | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name | e |
|------------------|---|
|------------------|---|

The name of the Limited Liability Company is:

HAMMERHEAD FRED'S, 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:

15238 Front Beach Road

Panama City Beach, FL 32413

15238 Front Beach Road Panama City Beach, FL 32413

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:

Derrick Bennett

Name

15238 Front Beach Road

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

Panama City Beach

FL 32413

City

Zıp.

FILED SECRETARY OF STATE TALLA!!ASSEE, FLORIDA

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

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMRR" = Authorized Member

| | "MGR" = Manager | | Comuci N. Bonnett | |
|--------|--------------------------|-------------------|--|--------------------|
| | MGR | | Samuel N. Bennett | |
| | | | 15238 Front Beach Road | |
| | | | Panama City Beach, FL 32413 | |
| | MGR | | Michael R. Bennett | |
| | | | 15238 Front Beach Road | |
| | · | | Panama City Beach, FL 32413 | |
| | | | | |
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| | • | | | |
| | (Use attachment if no | ecessary) | | |
| ARTI | CLE V. Effective date | if other than the | date of filing: (C | PTIONAL) |
| (If an | effective date is listed | , the date must | be specific and cannot be more than five b | usiness days prior |
| | 00 days after the date o | | · • | • |
| A DTI | CLE VI: Other provisi | nne ifany | | |
| WKII | CLE VI. Other provisi | ons, it any. | | |
| | | | | |
| | | , | | |

REOUIRED 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.)

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