L15000213150

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #	//)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)
(D	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
		of Status

Office Use Only



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12/18/15--01015--016 **180.00

SECRETARY OF STATE
SECRETARY OF

EFFECTIVE DATE 12/31/15
12/30/15

COVER LETTER

TO:	Registration 8 Division of C			
SUBJ	JECT:		Gateway Plaza SR70 LL	С
		(Name	of Resulting Florida Limi	ted Company)
				and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g this matter to:	
Annie	Breitinger			
		(Contact Person)		
Blaloc	k Walters, P.A.			
		(Firm/Company)		
802 11	th Street W.			
		(Address)		
Brader	nton, FL 34205			
	(1	City, State and Zip Code)		
rwolf@	vicorr.com			
E-r	nail Address: (to b	e used for future annual re	port notifications)	
For fu	ırther informati	on concerning this ma	tter, please call:	
Annie	Breitinger		_at (⁹⁴¹)	748-0100
	(Name of Conta	act Person)	(Area Code) (Da	aytime Telephone Number)
Enclo	sed is a check t	for the following amou	int:	
(\$25 fc & \$125	50.00 Filing Fees or Conversion 5 for Articles anization)	\$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
Regis Divisi Clifto 2661	EET ADDRES tration Section ion of Corporat in Building Executive Cent nassee, FL 323	ions er Circle	Registration	Corporations 327

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.

	(Enter Name of Other Business Entity)
2. The "Other Business Enti	ty" 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 in	corporated under the laws of Florida
1/	(Enter state, or if a non-U.S. entity, the name of the country)
on August 29, 2011 (date of organization, formation)	on or incorporation)
3. The name of the Florida I	Limited Liability Company as set forth in the attached Articles of Organization:
Gateway Plaza SR70 LLC	
	r Name of Florida Limited Liability Company)
(Enter 4. If not effective on the date (The effective date: 1) can date this document is filed date listed in the attached A	e of filing, enter the effective date: not be prior to date of receipt or filed date nor more than 90 days after the by the Florida Department of State; AND 2) must be the same as the effective Articles of Organization, if an effective date is listed therein.) lock does not meet the applicable statutory filing requirements, this date will not be listed as the

Page 1 of 2

Signed this 16 day of December	20_15
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative: Printed Name: Ronald Wolf	Little: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Signature: Printed Name: Ronald Wolf	Title: Manager of General Partner
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature: Printed Name:	TRI'. I
Printed Name:	i itie:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, o If Directors or Officers have not been selected, an I	
If Florida General Partnership or Limited Liabi Signature of one General Partner.	llity Partnership:
If Florida Limited Partnership or Limited Liabi Signatures of <u>ALL</u> General Partners.	lity Limited Partuership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

TO DEC 18 PM D: On TO TO THE STATE OF THE ST

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabili	ty Company is:		
		y Plaza SR70 LLC	
· (Must end	with the words "Limited	Liability Compar	ny, "L.L.C.," or "I.L.C.")
ARTICLE II - Address: The mailing address and street a	ddress of the principal (office of the Limite	d Liability Company is:
Princip	al Office Address:		Mailing Address:
2 N. Tamiami Trail		2 N	J. Tamiami Trail
Ste. 100			. 100
Sarasota, Florida 34	236	Sa	rasota, Florida 34236
The name and the Florida street		tonald Wolf	
	A.V. m m		
•	2 N. Tamiami Trail: Florida street addres		accentable)
	_		
	Sarasota	FL _	34236
	City	State	Zip
place designated in this certificate further agree to comply with the p	e, I hereby accept the approvisions of all statutes to bligations of my position	pointment as registive lating to the proper as registered agen	the above stated limited liability company at the ered agent and agree to act in this capacity. I ser and complete performance of my duties, and it as provided for in Chapter 605, F.S
		(CONTINUEL))

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR — Manager	Ronald Wolf	
	2 N. Tamiami Trail Ste 100	
	Sarasota, Florida 34236	
		
· · · · · · · · · · · · · · · · · · ·		
Tective date is listed, the date mu	the date of filing: <u>December 31, 2015</u> . (OPTION list be specific and cannot be more than five busines	
LE V: Effective date, if other than fective date is listed, the date mudays after the date of filing.) he date inserted in this block does not must be effective date on the Department of St.	est the applicable statutory filing requirements, this date will not	s day
LE V: Effective date, if other than fective date is listed, the date my days after the date of filing.)	est the applicable statutory filing requirements, this date will not	s day
LE V: Effective date, if other than fective date is listed, the date mudays after the date of filing.) he date inserted in this block does not me's effective date on the Department of St. LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mental finish document is executed I am aware that any false infective date in the strength of the strength	est the applicable statutory filing requirements, this date will not	s day
LE V: Effective date, if other than fective date is listed, the date mudays after the date of filing.) he date inserted in this block does not me's effective date on the Department of St. LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mental finish document is executed I am aware that any false infective date in the strength of the strength	the applicable statutory filing requirements, this date will not ate's records. The presentative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State	s day