# 116000056/69

| (Re                       | questor's Name)   |                 |
|---------------------------|-------------------|-----------------|
| (Ad                       | dress)            |                 |
| (Ad                       | dress)            |                 |
| (Cit                      | y/State/Zip/Phone | <del>= #)</del> |
| <u></u>                   | WAIT              | MAIL            |
| (Bu                       | siness Entity Nan | ne)             |
| (Do                       | cument Number)    |                 |
| Certified Copies          | _ Certificates    | s of Status     |
| Special Instructions to I | Filing Officer:   |                 |
|                           |                   |                 |
|                           |                   |                 |
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Office Use Only



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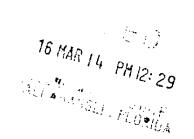
S. GILBERT

### **COVER LETTER**

| TO: Registration S Division of C   |  |   |   |
|--|--|---|---|
| SUBJECT, RHODES  | INVESTMENTS C&B, I                                   | LC  |   |
| SUBJECT:   | (Name  | of Resulting Florida Li                   | mited Company)  |
|  |  |   | a, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S. |
| Please return all corre  | espondence concerning                                | g this matter to:                         |   |
| Christy Lee, Paralegal   |  |   |   |
|  | (Contact Person)                                     |   |   |
| Seiller Waterman LLC   | (F' (C)  |   |   |
| AZO C. For all Course Cut  | (Firm/Company)                                       |   |   |
| 462 S. Fourth Street, Sui  | (Address)  |   |   |
|  | •  |   |   |
| Louisville, Kentucky 402   |  |   |   |
| ,  | City, State and Zip Code)                            |   |   |
| lee@derbycitylaw.com   | e used for future annual re                          | nort notifications)                       |   |
|  |  |   |   |
| For further information  | on concerning this ma                                | tter, please call:                        |   |
| Christy Lee  |  | _at (502)                                 | 371-3503  |
| (Name of Conta   | ct Person)   | (Area Code)                               | (Daytime Telephone Number)  |
| Enclosed is a check f  | or the following amou                                | int:                                      |   |
| \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | \$155.00 Filing Fees<br>and Certificate of<br>Status | □\$180.00 Filing Fe<br>and Certified Copy | Certificate of Status   |
| STREET ADDRES  | S:   | MAILIN                                    | (G ADDRESS:   |
| Registration Section   |  |   | ion Section   |
| Division of Corporat   | ions   |   | of Corporations   |
| Clifton Building 2661 Executive Cent   | er Circle  | P. O. Box<br>Tallahass                    | x 6327<br>see FL 32314  |

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 Busi<br>Rhodes Investments, LLC  | ness Entity" immediately prior to the filing of the Articles of Conversion is:   |
|--|--|
|  | Enter Name of Other Business Entity)   |
| 2. The "Other Business Entity"   | I limited liability company  |
| 2. 1.10 01.10. 2.10.110.00 2.1111.   | (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)  |
| First organized, formed or incorp  | porated under the laws of Kentucky   |
| September 27, 2010   | (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 Limit   | ited Liability Company as set forth in the attached Articles of Organization:  |
| RHODES INVESTMENTS C&B, LL   | С  |
| (Enter Na  | me of Florida Limited Liability Company)   |
| (The effective date: 1) cannot date this document is filed by t date listed in the attached Arti | filing, enter the effective date:  be prior to date of receipt or filed date nor more than 90 days after the the Florida Department of State; AND 2) must be the same as the effective cles of Organization, if an effective date is listed therein.) does not meet the applicable statutory filing requirements, this date will not be listed as the truent of State's records. |
| 5. The plan of conversion has be   | en approved in accordance with all applicable statutes.  |

Page 1 of 2

| Signed this 10th day of March   | 20_16  |
|---|--|
| Signature of Authorized Representative of Limit   |  |
| Signature of Authorized Representative:  Printed Name: Carl Rhodes  | Title: Manager   |
| Signature(s) on behalf of Other Business Entity;  | [See below for required signature(s)]                          |
| Signature: Carl Rhodes  Printed Name: Carl Rhodes   | Title: Manager   |
|   | <del>-</del>   |
| Signature:Printed Name:   | Title:   |
| Signature:Printed Name:   | Title:   |
| Signature:Printed Name:   |  |
| Signature:Printed Name:   |  |
| Signature:Printed Name:   |  |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liabili | corporator must sign.  |
| Signature of one General Partner.   | <u>,</u>   |
| If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.  | ty Limited Partnership:  |
| All others:<br>Signature of an authorized person.   |  |
| Fees:   |  |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:   | \$25.00<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) |

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:<br>The name of the Limited Liability Company is   | s:                                      |  |           |        |
|---|---|--|-----------|--------|
| RHODES INVESTMENTS C&B, LLC (Must end with the words "Limited Liab  | ility Company "L.L.C." or "LLC.")       | Minor.   |           |        |
| ARTICLE II - Address:   | my company, E.S.C., W. M.C.             |  |           |        |
| The mailing address and street address of the p   | principal office of the Limited         | Liability Co   | mpai      | ny is: |
| Principal Office Address:   | Mailing Address:                        |  |           |        |
| 7575 Pelican Bay Blvd.  | 7575 Pelican Bay Blvd.                  |  |           |        |
| Unit #701   | Unit #701                               |  |           |        |
| Naples, Florida 34108   | Naples, Florida 34108                   |  |           |        |
| ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)  The name and the Florida street address of the | stered Agent. You must designate an inc |  |           |        |
| Carl Rhodes   | registered agent are.                   | 754<br>  | <b>5</b>  |        |
| Nam   | ne                                      | ان کار<br>دو<br>در ان کار<br>دو ان کار   | HARN IL   | ٠      |
| 7575 Pelican Bay Blvd., # 701   |   | .*   |           | ·      |
| Florida street address (P.C   | D. Box NOT acceptable)                  |  | PH 12: 29 |        |
| Naples  | FL 34108                                | (11년<br>(11년 - 11년 - 1 | 29        |        |
| City  | Zip                                     | 3·   | _         |        |

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

| <u>Title:</u> "AMBR" = Authorized Member  | Name and Address:   |
|---|---|
| "MGR" = Manager   |   |
| MGR   | Carl Rhodes   |
|   | 7575 Pelican Bay Blvd., #701  |
|   | Naples, Florida 34108   |
|   |   |
|   |   |
|   |   |
|   | PARTY CONTROL |
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| ***************************************   |   |
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|   |   |
| n effective date is listed, the date n  | nn the date of filing: (OPTIONAL) nust be specific and cannot be more than five business day  |
| FICLE V: Effective date, if other that in effective date is listed, the date in 90 days after the date of filing.)  If the date inserted in this block does not ment's effective date on the Department of  | nust be specific and cannot be more than five business day meet the applicable statutory filing requirements, this date will not be listed.   |
| FICLE V: Effective date, if other than effective date is listed, the date in 90 days after the date of filing.)  If the date inserted in this block does not  | nust be specific and cannot be more than five business day meet the applicable statutory filing requirements, this date will not be listed.   |
| FICLE V: Effective date, if other that in effective date is listed, the date in 90 days after the date of filing.)  If the date inserted in this block does not ment's effective date on the Department of  | nust be specific and cannot be more than five business day meet the applicable statutory filing requirements, this date will not be listed.   |
| FICLE V: Effective date, if other that in effective date is listed, the date in r 90 days after the date of filing.)  If the date inserted in this block does not ment's effective date on the Department of TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:   | must be specific and cannot be more than five business day meet the applicable statutory filing requirements, this date will not be listed State's records.   |
| PICLE V: Effective date, if other that an effective date is listed, the date in r 90 days after the date of filing.)  If the date inserted in this block does not ment's effective date on the Department of TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a me This document is executed I am aware that any false in   | nust be specific and cannot be more than five business day meet the applicable statutory filing requirements, this date will not be listed.   |
| PICLE V: Effective date, if other that an effective date is listed, the date in 190 days after the date of filing.)  If the date inserted in this block does not ment's effective date on the Department of TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a me This document is executed I am aware that any false is constitutes a third degree for the street of the constitutes at third degree for the constitutes at third degree for the constitutes at third degree for the constitutes at | meet the applicable statutory filing requirements, this date will not be listed State's records.  Declaration and the statutory filing requirements, this date will not be listed state's records.  The state of a member of a member of an authorized representative of a member of an accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.  |
| PICLE V: Effective date, if other that an effective date is listed, the date in r 90 days after the date of filing.)  If the date inserted in this block does not ment's effective date on the Department of TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a me This document is executed I am aware that any false in   | meet the applicable statutory filing requirements, this date will not be listed State's records.  The property of a member of a member of an authorized representative of a member of an authorized representative of a member of an accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State release as provided for in s.817.155, F.S.  |
| PICLE V: Effective date, if other that an effective date is listed, the date in 190 days after the date of filing.)  If the date inserted in this block does not ment's effective date on the Department of TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a me This document is executed I am aware that any false is constitutes a third degree for the street of the constitutes at third degree for the constitutes at third degree for the constitutes at third degree for the constitutes at | must be specific and cannot be more than five business day meet the applicable statutory filing requirements, this date will not be listed State's records.  The property of an authorized representative of a member, and in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.  Typed or printed name of signee   |
| PICLE V: Effective date, if other that an effective date is listed, the date in 190 days after the date of filing.)  If the date inserted in this block does not ment's effective date on the Department of TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a ment of the department of an aware that any false is constitutes a third degree of the carl Rhodes, Manager.   | meet the applicable statutory filing requirements, this date will not be listed State's records.  The property of a member of a member of an authorized representative of a member of an authorized representative of a member of an accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State release as provided for in s.817.155, F.S.  |

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

ARTICLE IV-