L16000077851

(Requestor's Name)		
		•
(Address)		
(Address)		
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	iling Officer:	
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1) 11-	1145	
WHE-22145		
	Office Use On	ly



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03/22/16--01029--009 **115.00

02/29/16--01013--018 **35.00

EFFECTIVE DATE
5-1-16



COVER LETTER

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301



March 9, 2016

PENELOPE FRITZER CR GRAPEFRUIT BLOSSOM, INC. 4020 NW 101 DRIVE CORAL SPRINGS, FL 33075

RECEIVED MAR 2 1 RECT

SUBJECT: CR GRAPEFRUIT BLOSSOM, INC.

Ref. Number: P15000095957

We have received your document for CR GRAPEFRUIT BLOSSOM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong conversion form. Please complete the attached form. Please notice the different filing fees.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 716A00004875



March 28, 2016

PENELOPE FRITZER P.O. BOX 8332 CORAL SPRINGS, FL 33075 US

SUBJECT: CR GRAPEFRUIT BLOSSOM LLC

Ref. Number: W16000022745

We have received your document for CR GRAPEFRUIT BLOSSOM LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 116A00006293

Teresa Brown Regulatory Specialist II

www.sunbiz.org

EFFECTIVE DAIL

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
CR Grape Fruit Blossom LLC. (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: May 1, 2016. (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 1 loth day of Mouch	20 16.
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: PLAN Printed Name: PLANCE TO THE PRINTED TO THE PLANCE TO THE PRINTED T	Title president Partner
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Printed Name: Penelope Charles	Title: Possidas A
• •	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CR Grapelruib Blossom LLC.

(Must end with he 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:
4020 NW1010R.	PO BOX8332
Coral Springs	alo Fritzer
FL 33065	Coral Springs F135075

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:

Penelope, Fritzer

Name

4020 NW 101 Prive.

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

Coral Springs FL 33065

City Zip

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 Agen's Signature (REQURED)

(CONTINUED)

Page 1 of 2

The name and address of each person Company:	authorized to manage and control the Limited Liability
Title: "AMBR" = Authorized Member "MGR" = Manager NGR, AMBR	Name and Address: PON LOPO FRITZES 4020 NW 101 OR: COURT SPRINGS FL 35065
AMBR_	Bartholomew Bland 4020 NW 101 DR. Coral Springs FL 33065
(Use attachment if necessary)	
(If an effective date is listed, the date must to or 90 days after the date of filing.)	the applicable statutory filing requirements, this date will not be listed as the seconds.
ARTICLE VI: Other provisions, if any.	
Signature of a member This document is executed in a I am aware that any false information constitutes a third degree felony. Ty	or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. as provided for in s.817.155, F.S. by as provided for in s.817.155, F.S. as provided for in s.817.155, F.S. by as provided for in s.817.155, F.S.
\$ 30.00 Certified Copy (Option	al) \$ 5.00 Certificate of Status (Optional)

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