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16 APR 29 AM 8: 44
SECRETARY OF STATE

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THOMAS M. ZAPPIA*

JOEL T. LEVAHN

STEVEN H. BERNDT*

SUSAN BREID**

March 18, 2016

Direct Dial No. 763-502-7131 Email Address: sbreid@zlhlaw.com

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

RE:

Pro Links Sports of Boca Raton, L.L.C., a Texas limited liability company ("Pro Links")

Dear Sir or Madam:

Our office represents the above referenced entity. Pro Links has been a limited liability company original formed in Texas since 2006. Pro Links is also registered to do business in the State of Florida via Doc. No. M06000005339. Because Pro Links is registered with your office as a foreign limited liability company, I felt it would be helpful to include this brief narrative so upon review the issue of the same name can be resolved.

It is now the intent of the members of Pro Links, Hollis Cavner and Bryan Naugle, to convert the entity from a Texas limited liability company to a Florida limited liability company. To that end I am enclosing the Articles of Conversion, Articles of Organization and fees necessary to achieve the conversion of Pro Links into a Florida limited liability company.

Please call me at 763-502-7131 if there are any questions or if you need additional information/documentation to effect the conversion. Thank you.

Yours very truly,

Susan Breid Attorney at Law

Enclosures

941 HILLWIND RD. N.E.
SUITE 301
MINNEAPOLIS, MN
55432-5965
Tel: 763-571-7721

Fax: 763-571-7734

COVER LETTER

TO:	Registration S Division of C				
SUR	FCT. Pro Links	Sports of Boca Raton, LL	С		
5000	ECT	(Name	of Resulting Florida L	imite	ed Company)
			_		nd fees are submitted to convert an "Othe coordance with s. 605.1045, F.S.
Please	e return all corre	espondence concernin	g this matter to:		
Susan	Breid				
-		(Contact Person)			
Zappia	& LeVahn, Ltd.				
		(Firm/Company)			
941 Hi	llwind Rd NE, Su	ite 301			
		(Address)	· · · · · · · · · · · · · · · · · · ·		
Fridley	, MN 55432				
		City, State and Zip Code)			
sbreid(@zlhlaw.com	•			
E-r	nail Address: (to b	e used for future annual re	port notifications)		
For fu	irther informati	on concerning this ma	tter, please call:		
Susan	Breid		_at (⁷⁶³)	502.7	7131
	(Name of Conta	ct Person)	(Area Code)	(Day	ytime Telephone Number)
Enclo	sed is a check f	or the following amou	int:		
(\$25 fc & \$125	60.00 Filing Fees or Conversion of for Articles anization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing For and Certified Copy	es	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Regis Divisi Clifto	EET ADDRES tration Section ion of Corporat n Building Executive Cent	ions	Registrat Division P. O. Box	ion S of C x 632	Corporations

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2016

SUSAN BREID ZAPPIA & LE VAHN, LTD. 941 HILLWIND RD NE, SUITE 301 FRIDLEY, MN 55432

SUBJECT: PRO LINKS SPORTS OF BOCA RATON, LLC

Ref. Number: W16000023181

We have received your document for PRO LINKS SPORTS OF BOCA RATON, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 file current year Annual Report "2016". (M06000005339)

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 216A00006427

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED 16 APR 29 AM 8: 44

SECRETARY OF STATE TALLAHASSEE FLORIDA

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

Pro Links Sports of Boca Raton, LLC	106-5339	IS:
	Name of Other Business Entity)	
2. The "Other Business Entity" is a	imited liability company	
(E	Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporate	ed under the laws of Texas	
July 25, 2006	(Enter state, or if a non-U.S. entity, the name of the country)	١
on date of organization, formation or incor	poration)	
3. The name of the Florida Limited L	Liability Company as set forth in the attached Articles of Organizat	tion:
Pro Links Sports of Boca Raton, LLC		
(Enter Name of	Florida Limited Liability Company)	
4. If not effective on the date of filing	g, enter the effective date:	
(The effective date: 1) cannot be pridate this document is filed by the Flate listed in the attached Articles of	rior to date of receipt or filed date nor more than 90 days after the lorida Department of State; <u>AND</u> 2) must be the same as the effect of Organization, if an effective date is listed therein.) not meet the applicable statutory filing requirements, this date will not be listed as	ective
5. The plan of conversion has been ap	oproved in accordance with all applicable statutes.	

Page 1 of 2

Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: Signature of Authorized Representative: Title: Chief Manager SECRETARY OF SACRETARY OF
Signature of Authorized Representative: Printed Name: Hollis Cavner Title: Chief Manager SEGRE TARY OF SCATE (ALL AHASSEE FLORIO). Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Hollis Cavner Title: Chief Manager Signature: Printed Name: Signature: Printed Name: Title: Signature: If Florida Corporation or Limited Liability Partnership: Signature of one General Partnership or Limited Liability Limited Partnership:
Signature: Signature: Printed Name: Hollis Cavner Signature: Printed Name: Hollis Cavner Title: Chief Manager Signature: Printed Name: Title:
Signature: Signature: Printed Name: Hollis Cavner Signature: Printed Name: Hollis Cavner Title: Chief Manager Signature: Printed Name: Title:
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Hollis Cavner Title: Chief Manager Signature: Printed Name: Signature: Printed Name: Title: Signature: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership:
Signature: Printed Name: Hollis Cavner Title: Chief Manager
Signature: Printed Name: Hollis Cavner Signature: Printed Name: Signature: Printed Name: Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partnership or Limited Liability Limited Partnership:
Printed Name: Millis Cavner Signature: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: 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 Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partnership or Limited Liability Limited Partnership:
Signature: Printed Name: Signature: Printed Name: Title: Signature of Chairman, Vice Chairman, Director, or Officer. If Florida Corporation: Signature of Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partnership or Limited Liability Limited Partnership:
Printed Name: Title:
Printed Name: Title:
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If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership:
Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership:
If Florida Limited Partnership or Limited Liability Limited Partnership:
Signatures of ALL General Partners.
A 11 - AL
All others: Signature of an authorized person.
Signature of an authorized person.
Fees:
Articles of Conversion: \$25.00
Fees for Florida Articles of Organization: \$125.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan	ne:		
The name of the Li	mited Liability Company	is:	
Pro Links Sports of Bo	oca Raton, LLC		
		ability Company, "L.L.C.," or "LLC	(.'')
			
ARTICLE II - Ad		principal office of the Lin	sitad Lighility Company is
The maning addres	s and street address of the	principal office of the Lin	med Liability Company is
Principal Office A	ddress:	Mailing Address:	
6450 East Rogers Circ	le		
Boca Raton, FL 33487			
(The Limited Liability Cobusiness entity with an a	ompany cannot serve as its own Reactive Florida registration.) Florida street address of th	red Office, & Registered Agent. You must designate e registered agent are:	e an individual or another FILED
	Hollis Cavner		_ <u> </u>
	Na	me	8: 1,1
	6450 East Rogers Circle		, ,
	Florida street address (P	.O. Box NOT acceptable)	-
	Boca Raton	FL 33487	
	City	Zip	-
_			2 1 1 11 11

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

Company:		FILED
Title:	Name and Address:	16 APR 29 AM 8: 44
"AMBR" = Authorized Member		SECOND AM 8: 44
"MGR" = Manager MGR	Hollis Cavner	SECRETARY OF STATE TALLAHASSEE FLURIDA
Mon	6450 East Rogers Circle	THE COURT OF THE CASE OF THE C
	Boca Raton, FL 33487	
		
		
(Use attachment if necessary)		
(Use attachment if necessary)		
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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)