(Re	equestor's Name)	<u> </u>
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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FILED

V HERRING DEC - 5 2016

COVER LETTER

TO:	Registration S Division of C				
SUBJ	ECT: 3K Seas, 1	LLC			
			of Resulting Florida	Limited	d Company)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corre	espondence concernin	g this matter to:		
Santo .	A. Cugliotta Jr.				
		(Contact Person)			
3K Sea	is, LLC				
		(Firm/Company)			
3887 V	Voodlake Drive				
		(Address)			
Bonita	Springs, FL 3413	4			
	((City, State and Zip Code)			
sandy.	cugliotta@3kseas.c	com			
E-n	nail Address: (to b	e used for future annual re	port notifications)		
For fu	rther information	on concerning this ma	tter, please call:		
Santo	A. Cugliotta Jr.		_at (⁶⁰⁹	313-8	238
	(Name of Conta	ct Person)	(Area Code)		time Telephone Number)
Enclo	sed is a check f	or the following amou	nnt:		
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	\$155.00 Filing Fees and Certificate of Status	□\$180,00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STRE	EET ADDRESS	S:	MAILI	NG A	DDRESS:
_	tration Section		Registra		
	ion of Corporati n Building	ions	Division P. O. Be		orporations
	n Building Executive Cente	er Circle			FL 32314
	nassee, FL 3230			, •	

Articles of Conversion

FILED

For "Other Business Entity"

2816 NOV 28 AM 8: 29

Into

SECLE LARY OF STATE

Florida Limited Liability Company LAHASSEE, FLORIDA

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.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Seas, LLC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a Limited Liability Company.
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fi	rst organized, formed or incorporated under the laws of
	July 18, 2011 (Enter state, or if a non-U.S. entity, the name of the country)
OI.	(date of organization, formation or incorporation)
	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Seas, LLC
	(Enter Name of Florida Limited Liability Company)
da da <u>No</u>	If not effective on the date of filing, enter the effective date: The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the steet this document is filed by the Florida Department of State; AND 2) must be the same as the effective steel isted in the attached Articles of Organization, if an effective date is listed therein.) In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the comment's effective date on the Department of State's records.
	The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

Signed this 22nd day of November	20_16	FILED
Signature of Authorized Representative of Limi	ited Liability Company:	2016 NOV 28 AM 8: 29
Signature of Authorized Representative: Printed Name: Santo A. Cugliotta Jr	Title CEO	SEC LIME OF STATE TALLAHASSEE, FLORIDA
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)l
Signature: Printed Name: Santo A Explosite Jo	_Title:CEO	
Signature:		
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	T'A.	
rimed Name.	i ide:	
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc		
The breeders of officers have not been selected, an inc	corporator must sign.	
If Florida General Partnership or Limited Liability 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:		
3K Seas, LLC		
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
3887 Woodlake Drive	3887 Woodlake Drive	
Bonita Springs, FL 34134	Bonita Springs, FL 34134	
		
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)		
The name and the Florida street address of the re	egistered agent are:	
Santo A. Cugliotta Jr		
Name	!	
2007 Was diales Deive		
3887 Woodlake Drive Florida street address (P.O.	Box NOT acceptable)	
Bonita Springs	FL 34134	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and complete paccept the obligations of my position as registered Agent's Signature (CONTINE)	this certificate, I hereby accestly. I further agree to comply performance of my duties, and distered agent as provided for mature (REQUIRED)	ept the appointment as with the provisions of all I am familiar with and in Chapter 605, F.S
		8: 29 STATE FLORIDI
Page 1 of	f2	6. Hg

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR / MGR	Santo A. Cugliotta Jr
AWDR/ WOK	3887 Woodlake Drive
	Bonita Springs, FL 34134
	20ma opiniga, 13 o 110
	V for your
	ACE ALI
	m,—
	
	<u> </u>
	9° 13
LE V: Effective date, if other that fective date is listed, the date m	n the date of filing: (OPTIONA
fective date is listed, the date m days after the date of filing.) he date inserted in this block does not not a seffective date on the Department of SLEVI: Other provisions, if any.	n the date of filing: (OPTIONA nust be specific and cannot be more than five business deneet the applicable statutory filing requirements, this date will not be
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) he date inserted in this block does not result of seffective date on the Department of State VI: Other provisions, if any.	n the date of filing: (OPTIONA nust be specific and cannot be more than five business deneet the applicable statutory filing requirements, this date will not be state's records.
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) he date inserted in this block does not not seffective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a menuing the second of the document is executed I am aware that any false in	n the date of filing: (OPTIONA nust be specific and cannot be more than five business defined the applicable statutory filing requirements, this date will not be state's records.
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) he date inserted in this block does not not seffective date on the Department of State VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a menuing the second of the document is executed I am aware that any false in	n the date of filing:

Page 2 of 2

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

ARTICLE IV-