116000224029

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne) ·
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

N. SAMS DEC 12 2016



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11/28/16--01045--023 **150.00

16 NOV 28 PN 4: 05 SECRETARY OF STATE ALLAHASSEE, FLORIDA



19 DEC 12 PH 3: 31

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 30, 2016

KERRY LUTZ 5500 MILITARY TRAIL, #22-24 JUPITER, FL 33458

SUBJECT: 8910 LLC

Ref. Number: W16000079940

We have received your document for 8910 LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

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.

Nadira D McClees-Sams Regulatory Specialist II New Filing Section

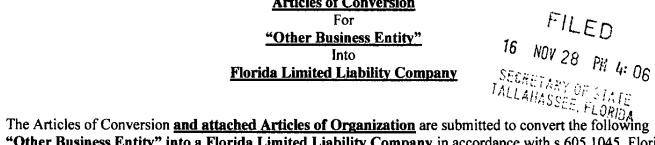
Letter Number: 016A00025475



COVER LETTER

TO: Registration Division of C				
SUBJECT: 8910 LL	С			
	(Name	of Resulting Florid	a Limite	d Company)
				nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	respondence concerning	g this matter to:		
Kerry Lutz				
	(Contact Person)		_	
	(Firm/Company)			
5500 Military Trail, #22	-24		_	
	(Address)			
Jupiter, FL 33458				
(City, State and Zip Code)			
khl@kerrylutz.com				
E-mail Address: (to	be used for future annual re	port notifications)		
For further informat	ion concerning this ma	tter, please call:		
Kerry Lutz		at (⁵⁶¹	299-5	5889
(Name of Cont	act Person)	(Area Code	(Day	ytime Telephone Number)
Enclosed is a check	for the following amou	int:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co	_	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	SS:	MAH	ING A	ADDRESS:
Registration Section		_		Section
Division of Corpora	tions			Corporations
Clifton Building 2661 Executive Cen	tau Cinala		Box 63	
Tallahassee, FL 323		i anar	iassee,	FL 32314

Articles of Conversion



"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" KHL Family Limited Partnership	" immediately prior to the filing of the Articles of Conversion is:
The state of the s	of Other Business Entity)
2. The "Other Business Entity" is a limited	partnership
(Enter en	tity type. Example: corporation, limited partnership, ral partnership, common law or business trust, etc.)
First organized, formed or incorporated und	ler the laws of Nevada
May 26, 2016	(Enter state, or if a non-U.S. entity, the name of the country)
on(date of organization, formation or incorporation	<u>n)</u> .
3. The name of the Florida Limited Liabilit	ty Company as set forth in the attached Articles of Organization:
(Enter Name of Florida	a Limited Liability Company)
	er the effective date:
date this document is filed by the Florida date listed in the attached Articles of Org	date of receipt or filed date nor more than 90 days after the Department of State; <u>AND</u> 2) must be the same as the effective ganization, if an effective date is listed therein.) et the applicable statutory filing requirements, this date will not be listed as the te's records.
5. The plan of conversion has been approve	ed in accordance with all applicable statutes.

Page 1 of 2

Signed this 18th day of November	20_16
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Printed-Name: Kerry Lutz	le fit
Signature(s) on behalf of Other Business Entity:	
11 15/1/	see below for required signature(s)]
Signature: Printed Name: Kerry Lutz	Title: Managing Member
Printed Name: Kerry Luiz >	Title: Managing Member
Signature:	
Printed Name:	
Signatura	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	Tido
Printed Name:	I tite:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of one General Landier.	
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:	\$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 The name of t	he Limited Liability Company	is:			
8910 LLC					
	(Must end with the words "Limited I	iability Company, "L.L.C.," or "LLC.")			
ARTICLE II	- Address:				
The mailing a	ddress and street address of th	e principal office of the Limite	d Liability	Con	ıpany i
Principal Off	ice Address:	Mailing Address:			
5500 Military Ta	rail, #22-242, Jupiter, FL 33458	5500 Military Trail, #22-242			
•		7 1 22 450			
		Jupiter, FL 33458			
		Jupiter, FL 33458		_	
(The Limited Liab business entity w		ered Office, & Registered Ag Registered Agent. You must designate an			
(The Limited Liab business entity w	ility Company cannot serve as its own Fith an active Florida registration.)	ered Office, & Registered Ag Registered Agent. You must designate an	individual or	anothe	r
(The Limited Liab business entity w	ility Company cannot serve as its own Fith an active Florida registration.) I the Florida street address of t Kerry Lutz	ered Office, & Registered Ag Registered Agent. You must designate an	individual or	anothe	r
(The Limited Liab business entity w	ility Company cannot serve as its own Frith an active Florida registration.) I the Florida street address of the Kerry Lutz No. 2500 Military Trail, #22-242	ered Office, & Registered Age Registered Agent. You must designate an the registered agent are:	individual or SEGRETARY OF	anothe 16 NOV 28	
(The Limited Liab business entity w	ility Company cannot serve as its own Frith an active Florida registration.) I the Florida street address of the Kerry Lutz No. 2500 Military Trail, #22-242	ered Office, & Registered Ag Registered Agent. You must designate an the registered agent are:	individual or SEGRETARY OF	anothe 16 NOV 28 PH 4:	r
(The Limited Liab business entity w	ility Company cannot serve as its own Frith an active Florida registration.) I the Florida street address of the Kerry Lutz No. 2500 Military Trail, #22-242	ered Office, & Registered Age Registered Agent. You must designate an the registered agent are:	individual or	anothe 16 NOV 28 PH	

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 N	Name and Address:
"MGR" = Manager	vieliloci
MGR	Kerry Lutz
	5500 Military Trail, #22-242
	Jupiter, FL 33458
	
	The state of the s
(Use attachment if neces	sary)
RTICLE V: Effective date, if	other than the date of filing: January 1, 2017 (OPTIONAL)
RTICLE V: Effective date, if of an effective date is listed, the	other than the date of filing: <u>January 1, 2017</u> . (OPTIONAL) e date must be specific and cannot be more than five business days
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of file.	other than the date of filing: January 1, 2017 (OPTIONAL) e date must be specific and cannot be more than five business days pling.)
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of file ote: If the date inserted in this block	other than the date of filing: January 1, 2017 e date must be specific and cannot be more than five business days pling.) does not meet the applicable statutory filing requirements, this date will not be listed
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of file.	other than the date of filing: January 1, 2017 e date must be specific and cannot be more than five business days pling.) does not meet the applicable statutory filing requirements, this date will not be listed
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RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of file ote: If the date inserted in this block ocument's effective date on the Depart	other than the date of filing: January 1, 2017
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RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of filete: If the date inserted in this block cument's effective date on the Department of the Depart	other than the date of filing: January 1, 2017
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of filete: If the date inserted in this block cument's effective date on the Department of the Depart	other than the date of filing: January 1, 2017
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of filete: If the date inserted in this block cument's effective date on the Department's effective date is listed, the or 90 days after the date of filete. REQUIRED SIGNATURED	other than the date of filing: January 1, 2017 (OPTIONAL) e date must be specific and cannot be more than five business days pling.) does not meet the applicable statutory filing requirements, this date will not be listed timent of State's records. if any.

ARTICLE IV-

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)
Page 2 of 2

Typed or printed name of signee

Kerry Lutz