1100042194

(Requestor's Name)
(Address)
(1887-000)
(Address)
(City/State/Zip/Phone #)
` , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Decamentalize)
Certified Copies Certificates of Status
Consider Instructions to Filling Officers
Special Instructions to Filing Officer:

Office Use Only

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11 FEB 23 PM +

C. GOLDEN FEB 2 7 2017 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 521349 4338256

AUTHORIZATION

COST LIMIT

ORDER DATE: February 23, 2017

ORDER TIME : 3:28 PM

ORDER NO. : 521349-055

CUSTOMER NO: 4338256

DOMESTIC AMENDMENT FILING

NAME: EQUITY ONE (WESTPORT) INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

_ PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS:

COVER LETTER

TO:	Registration S Division of Co				
SUBJ	Equity On	e (Westport) LLC			
			ulting Florida Limited Com	npany)	
			_	d fees are submitted to c ccordance with s. 605.10	
Pleas	e return all corre	espondence concerning	g this matter to:		
Laura	-Jayne Urso				
		(Contact Person)	· · · · · · · · · · · · · · · · · · ·		
Kirkla	ind & Ellis LLP				
	·	(Firm/Company)			
601 L	exington Avenue				
	····	(Address)	· · · · · · · · · · · · · · · · · · ·		
New Y	York, NY 10022				
	((City, State and Zip Code)			
		•			
E-	mail Address: (to b	e used for future annual re	port notifications)		
For f	urther information	on concerning this ma	tter, please call:		
			at ()		
	(Name of Conta	et Person)	(Area Code) (Day	ytime Telephone Number)	
		or the following amou a bank located in the		sed by this office must b	e payable in US
(\$25 f & \$12	50.00 Filing Fees for Conversion 5 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status	F-0 F-0
Regis Divis Clifte 2661	EET ADDRESS stration Section sion of Corporat on Building Executive Cent	ions er Circle	MAILING A Registration Division of O P. O. Box 63 Tallahassee,	Section Corporations 27	



FLORIDA DEPARTMENT OF STATE Division of Corporations

2017 FE3 13 13/10: 5%

February 24, 2017

CORPORATION SERVICE COMPANY

RESUBMIT

Please give original submission date as file date.

SUBJECT: EQUITY ONE (WESTPORT) LLC

Ref. Number: W17000016317

We have received your document for EQUITY ONE (WESTPORT) LLC and the authorization to debit your account in the amount of \$185.00. However, the document has not been filed and is being returned for the following:

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 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 717A00003650



Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

2017 FED 115 (711 **10:** 5%)

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.

Equity One (Westport) Inc.	of Other Business Entity) POHOWINGEL
·	
2. The "Other Business Entity" is a corporat	1011
(Enter en	tity type. Example: corporation, limited partnership, al partnership, common law or business trust, etc.)
First organized, formed or incorporated und	er the laws of Florida
10/28/2004 on	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation	<u></u> 1)
3. The name of the Florida Limited Liabilit Equity One (Westport) LLC	y Company as set forth in the attached Articles of Organization:
(Enter Name of Florida	Limited Liability Company)
4. If not effective on the date of filing, ente	r the effective date: Upon filing
(The effective date: 1) cannot be prior to	date of receipt or filed date nor more than 90 days after the
	Department of State; AND 2) must be the same as the effective
date listed in the attached Articles of Org	anization, if an effective date is listed therein.) t the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Department of State	e's records.
5. The plan of conversion has been approved	d in accordance with all applicable statutes.
6. The "Converted or Other Business Entity" which such members are entitled under ss.	has agreed to pay any members having appraisal rights the amount to 605.1006 and 605.1061-605.1072, F.S.

Signed this 23rd day of February	20_17
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Aaron Kitlowski	Title: VP and Secretary
Signature(s) on behalf of Other Business Entity: [
Signature: Said 1822. Printed Name: Aaron Kitlowski	Title: VP and Secretary
Signature:Printed Name:	Title:
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 Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fces:	
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 Liab	ility Company is:			2011 FEA 1 G 11/10: 5's
The name of the Emmed Lizo	inity Company is.			
Equity One (West	nort) I I C			
	ontain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")	
•				
ARTICLE II - Address: The mailing address and stree	t address of the principal of	office of the Limited	Liability Company is	:
<u>Princ</u>	cipal Office Address:		Mailing A	ddress:
1600 N.E. Miami	Gardens Drive	1600	N.E. Miami Garden	s Drive
North Miami Beac	ch, FL 33179	Nort	h Miami Beach, FL 3	3179
		.		
ARTICLE III - Registered A	Avent. Registered Office.	& Registered Ager	it's Sionature:	
(The Limited Liability Compa				n individual or
another business entity with a	nn active Florida registrati	on.)		
The name and the Florida stre	et addragg of the registers	d soont oras		
The halfe and the Florida sae	er address of the registere	a agont are.		
	Corporation Service		 	_
		Name		
	1201 Hays Street			
	Florida street addre	ss (P.O. Box <u>NOT</u> a	cceptable)	_
	Tallahassee	FL	32301	_
	City	State	Zip	
laving been named as registere lace designated in this certifica triher agree to comply with the m familiar with and accept the	ate, I hereby accept the apper provisions of all statutes is obligations of my position Corporation Sarv By:	pointment as registers relating to the proper as registered agent of vice Company	ed agent and agree to and complete perforn as provided for in Cha	act in this capacity. I nance of my duties, and I
	Regis	tered Agent's Signat	ure (REQUIRED)	
		(CONTINUED)		

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
Equity One, IncAMB	1600 N.E. Miami Gardens Drive North Miami Beach, FL 33179
	Noth Main Death, 12 33177
(Use attachment if necessary) LE V: Effective date, if other than the date of	f filing: Upon Filing (OPTIONAL)
LE V: Effective date, if other than the date of fective date is listed, the date must be speciof filing.) If the date inserted in this block does not meanert's effective date on the Department of	ific and cannot be more than five business days prior to or et the applicable statutory filing requirements, this date will
LE V: Effective date, if other than the date of fective date is listed, the date must be specied of filing.) If the date inserted in this block does not measurent's effective date on the Department of LE VI: Other provisions, if any. REQUIRED SIGNATURE	ific and cannot be more than five business days prior to or et the applicable statutory filing requirements, this date will
LE V: Effective date, if other than the date of fective date is listed, the date must be specific of filing.) If the date inserted in this block does not measure the specific date on the Department of LE VI: Other provisions, if any. REQUIRED SIGNATURE Signature of a mean This document is executed I am aware that any false in	ific and cannot be more than five business days prior to or et the applicable statutory filing requirements, this date will
LE V: Effective date, if other than the date of fective date is listed, the date must be specied of filing.) If the date inserted in this block does not meanment's effective date on the Department of LE VI: Other provisions, if any. REQUIRED SIGNATURE Signature of a mean This document is executed I am aware that any false in constitutes a third degree for Aaron Kitlowski. Signature of a mean Constitutes at the constitutes at	et the applicable statutory filing requirements, this date will State's records. State's records. ber or an authorized representative of a member. In accordance with section 605,0203 (1) (b), Florida Statuta formation submitted in a document to the Department of Statelony as provided for in s.817.155, F.S.

Page 2 of 2