L17000049695

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |

Office Use Only



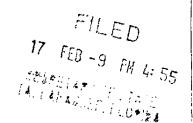
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02/09/17--01007--028 **155.00

FILED 17 FEB -9 FM 4:55



FLORIDA DEPARTMENT OF STATE Division of Corporations



February 10, 2017

JOHN C. BOVAY 3940 NW 16TH BLVD., BLDG. B GAINESVILLE, FL 32605

SUBJECT: O.S. B-B-Q. LLC Ref. Number: W17000012183

We have received your document for O.S. B-B-Q. 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.

2017 pagnet Confirmation attented

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.

original

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: 917A00002748

COVER LETTER

| TO: | New Filing Sec Division of Co | | | | |
|--------------------------------|--|---|--|--------------------------|--|
| SURI | ECT: O.S. B-B-0 | Q, LLC | | | |
| 5000 | Le 1 | (Name of Resi | ılting Florida Limited | Com | pany) |
| | | | - | | I fees are submitted to convert an "Othe cordance with s. 605.1045, F.S. |
| Please | return all corre | spondence concerning | this matter to: | | |
| John C | . Bovay | | | | |
| | | (Contact Person) | | | |
| Salter | Feiber | | | | |
| | | (Firm/Company) | | | |
| 3940 N | NW 16th Blvd., Bld | g. B | | | |
| | | (Address) | | | |
| Gaines | sville, FL 32605 | | | | |
| | (C | ity, State and Zip Code) | | | |
| paul@ | heritagemangemen | t.net | | | |
| E-n | nail Address: (to be | used for future annual rep | port notifications) | | |
| For fu | rther informatio | n concerning this mat | ter, please call: | | |
| John C | C. Bovay | | _at () | 376-8 | 021 |
| | (Name of Contac | et Person) | (Area Code) | (Day | time Telephone Number) |
| | | or the following amou a bank located in the | | ocess | ed by this office must be payable in US |
| (\$25 fc & \$12 | 60.00 Filing Fees or Conversion 5 for Articles anization) | ■\$155.00 Filing Fees and Certificate of Status | □\$180.00 Filing F and Certified Copy | | ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status |
| New Divis Clifto 2661 | EET ADDRESS Filing Section ion of Corporation Building Executive Center Tallahassee, Fl | ons | New Fil Division P. O. Bo | ing S n of C ox 63 | Corporations |

32301

Articles of Conversion

For

"Other Business Entity"

FILED

Into

17 FEB -9 FM 4: 55

Florida Limited Liability Company E發展 [A本 F] A] 上 [A] 上 [A] L AH # G [B] F [O # WA

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.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: O.S. B-B-Q, Inc. |
|---|
| (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 Florida |
| 02/24/1997 (Enter state, or if a non-U.S. entity, the name of the country) |
| (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: O.S. B-B-Q, LLC |
| (Enter Name of Florida Limited Liability Company) |
| 4. 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 calendar 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. |
| 5. The plan of conversion has been approved in accordance with all applicable statutes. |
| 6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to |

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

| Signed this 28th day of February | 20_17 |
|--|--|
| Signature of Authorized Representative of Limit | ed Liability Company: |
| Signature of Authorized Representative: Printed Name: John W. Kirkpatrick III | Title: MGR |
| Signature(s) on behalf of Other Business Entity: | See below for required signature(s) |
| · · · · · · · · · · · · · · · · · · · | |
| Signature: Jahn W. Kirkpatrick III | Title: President |
| Signature: | |
| Printed Name: | _ Title: |
| Signature: | |
| Signature: Printed Name: | |
| | |
| Signature:Printed Name: | Title: |
| | _ rac. |
| Signature:Printed Name: | |
| Printed Name: | _ Title: |
| Signature: | |
| Printed Name: | Title: |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Olf Directors or Officers have not been selected, an Inc. | Officer. corporator must sign. |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner. | y Partnership: |
| If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners. | |
| 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 - Na The name of the I | ame: Limited Liability Company | is: | | |
|--|---|---------------------------|---|--|
| O.S. B-B-Q, LLC | | | | |
| (M | lust contain the words "Limited Liah | bility Company, "L.L.C.," | or "LLC.") | |
| ARTICLE II - A The mailing addr | | e principal office of | f the Limited Liability Company is: | |
| Principal Office Address: | | Mailing Address: | | |
| 2605 SW 33rd Stree | t | 2605 SW 33rd 5 | Street | |
| Suite 200 | | Suite 200 | | |
| Ocala, FL 34471 | | Ocala, FL 34471 | | |
| (The Limited Liability business entity with a | | egistered Agent. You mu. | istered Agent's Signature: st designate an individual or another are: | |
| | Kenneth B. Kirkpatrick | | | |
| Name | | | | |
| | 2605 SW 33rd Street, Suite 200 Florida street address (P.O. Box NOT acceptable) | | | |
| | | | | |
| | Ocala | FL 34471 | | |
| | City | Z | ip | |

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)

| ARTI | CI | \mathbf{F} | IV. | |
|----------|----|--------------|-------|--|
| α | | | 1 7 ~ | |

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

| <u>Title:</u> | Name and Address: |
|--|---|
| "AMBR" = Authorized Member | |
| "MGR" = Manager | laha W. Wishawaish III |
| MGR | John W. Kirkpatrick III 5203 NW 49th Lane |
| | Gainesville, FL 32653 |
| | Camesvine, FL 32033 |
| MGR | William D. Olinger III |
| | 2700-A NW 43rd Street |
| | Gainesville, FL 32606 |
| | |
| MGR | Robert Thoburn |
| | 9409 SW 47th Lane |
| | Gainesville, FL 32605 |
| | |
| | - W |
| | |
| | |
| (Use attachment if necessary) | |
| (Ose attachment if necessary) | |
| ARTICLE V: Effective date if other than | the date of filing: |
| | ust be specific and cannot be more than five business days |
| prior to or 90 calendar days after the da | • |
| | eet the applicable statutory filing requirements, this date will not be listed as the |
| document's effective date on the Department of Sta | |
| | |
| ARTICLE VI: Other provisions, if any. | |
| | |
| | |
| | |
| REQUIRED SIGNATURE: | |
| 1 | |
| John Kan | tratele III |
| | ber or an authorized representative of a member. |
| This document is executed i | n accordance with section 605.0203 (1) (b), Florida Statutes. |
| I am aware that any false inf | ormation submitted in a document to the Department of State |

John W. Kirkpatrick III

Typed or printed name of signee

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)

constitutes a third degree felony as provided for in s.817.155, F.S.