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T SCHROEDER



Cynthia "Cindy" F. Skwierc, FRP

Paralegal (561) 650-8241

Fax: (561) 650-5300 cskwierc@jonesfoster.com

April 12, 2017

New Filing Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Articles of Conversion – Lightning Ridge Investments I, LLC, a California limited liability company to Bay Village I, LLC, a Florida limited liability company

Dear Sir or Madam:

Enclosed please find Articles of Conversion for Other Business Entity into Florida Limited Liability Company for Lightning Ridge Investments I, LLC, a California limited liability company, together with this firm's check in the amount of \$150.00 in payment of the required filing fee. For informational purposes, a copy of the California Secretary of State Entity Detail showing the Active Status of Lightning Ridge Investments I, LLC is also enclosed.

Should you have any questions regarding the enclosed, please do not hesitate to contact me.

Sincerely,

JONES, FOSTER, JOHNSTON & STUBBS, P.A.

'Cindy" F. Skwierc, Paralegal

Enclosures

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COVER LETTER

то:	New Filing S Division of C				
SHR	JECT: BAY VII	LAGE I, LLC			
500		(Name of Res	sulting Florida Limited	Company)	
			-	, and fees are submitted to con in accordance with s. 605.1045	
Pleas	e return all corr	espondence concernin	g this matter to:		
Willia	m G. Smith, Esqui	re			
	· · · · · · · · · · · · · · · · · · ·	(Contact Person)	<u> </u>		
Jones,	Foster, Johnston &	& Stubbs, P.A.			
		(Firm/Company)			
505 S.	Flagler Drive, Sui	ite 1100			
		(Address)			
West	Palm Beach, FL 33	401			
	(1	City, State and Zip Code)	 		
jfservi	ce@jonesfoster.co	m			
E-1	nail Address: (to b	e used for future annual re	port notifications)		
For fi	urther informati	on concerning this ma	tter, please call:		
	m G. Smith		ŕ	659-3000	
	(Name of Conta	net Percan)	at ()_	(Daytime Telephone Number)	
		,		-	
		for the following amou a bank located in the		cessed by this office must be p	ayable in US
(\$25 fo & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fe and Certified Copy	es \$\Bigsigs \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	
New	EET ADDRES Filing Section		New Filir	G ADDRESS: ng Section	
	ion of Corporat on Building	IOHS	Division o P. O. Box	of Corporations 6327	
	Executive Cent	er		ee, FL 32314	
Circle 3230	e Tallahassee, F I	L			

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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.

()	Enter Name of Other Business Entity)
2. The "Other Business Entity" i	limited liability company
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorp	porated under the laws of California
January 13, 2012	(Enter state, or if a non-U.S. entity, the name of the country)
on(date of organization, formation or	incorporation)
3. The name of the Florida Limi Bay Village I, LLC	ted Liability Company as set forth in the attached Articles of Organization:
(Enter Na	me of Florida Limited Liability Company)
(The effective date: 1) cannot lafter the date this document is	filing, enter the effective date: be prior to date of receipt or filed date nor more than 90 calendar days filed by the Florida Department of State; AND 2) must be the same as ttached Articles of Organization, if an effective date is listed therein.) does not meet the applicable statutory filing requirements, this date will not be listed as the

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 10th day of April	20_2017			
Signature of Authorized Representative of Limi	ted Liability Company:			
Signature of Authorized Representative: J. Michael Prince	Title: Authorized Member	_		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)			
Signature: Mulses Vind Printed Name: J. Michael Prince		_		
Printed Name: U.J. Michael Prince	Title: Authorized Member			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:	_		
Signature:Printed Name:				
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	corporator must sign.			
Signature of one General Partner.		· .		
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:		17 APR	•••
All others: Signature of an authorized person.			(,)	
<u>Fees:</u>			23 11 23	"
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	33	ස	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Liability Company, "L.L.C.," or "LLC.")
f the principal office of the Limited Liability Company is:
Mailing Address:
Mailing Address: 2276 Bay Village Court

The name and the Florida street address of the registered agent are:

business entity with an active Florida registration.)

Jones Foster Service, LLC	
Na	me
505 S. Flagler Drive, Suite 11	00
Florida street address (P	P.O. Box NOT acceptable)
West Palm Beach	FL 33401
City	Zip

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

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)

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:				
MGR	J. Michael Prince 2276 Bay Village Court Palm Beach Gardens, FL 33410				
	$\widetilde{y} \sim \widetilde{\omega}$				
	28				
(Use attachment if necessary)					
FICLE V: Effective date, if other than the	e date of filing: . (OPTIONAL)				
in effective date is listed, the date musi or to or 90 calendar days after the date (t be specific and cannot be more than five business days				
: If the date inserted in this block does not meet	the applicable statutory filing requirements, this date will not be listed a				
ment's effective date on the Department of State'	s records.				
FICLE VI: Other provisions, if any.					
FIGURE VI: Officer provisions, if any,					

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

J. Michael Prince

REQUIRED SIGNATURE:

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)