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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Filin	ng Officer:	
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Office Use Only



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CORPORATION(S) NAME

	14.		
	Min Clu	O, LLP	
			
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() Profit () NonProfit	() Amendmen	t	() Merger
() Foreign	() Dissolution		() Mark
() Limited Partnership () Reinstatement	() Annual Rep () Reservation		(X) Other COWLISION () Change of Registered Agent
() Certified Copy	() Photo Capie	98	() Certificate Under Seal
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11 11.6 Toll Free: 1-800-432-3028

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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.

Entity" immediately prior to the filing of the Articles of Conversion is:
Name of Other Business Entity)
imited liability partnership
Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
ed under the laws of Florida
(Enter state, or it a non-O.S. entity, the name of the country)
poration)
Liability Company as set forth in the attached Articles of Organization:
Florida Limited Liability Company)
g, enter the effective date: rior to date of receipt or filed date nor more than 90 calendar days by the Florida Department of State; AND 2) must be the same as hed Articles of Organization, if an effective date is listed therein.) not meet the applicable statutory filing requirements, this date will not be listed as the of State's records.

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 26 day of Jowk	
Signature of Authorized Representative of Limi	\
Signature of Authorized Representative:	
Printed Name: Ronald Rubin	Title: Member
Trinea (vaine, rooms room	Title.
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
	·
Signature:	
Printed Name; Ronald Rubin	Title: Partner
Signatura	
Signature:Printed Name:	Title
rimed Name.	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signatura	
Signature:Printed Name:	Title:
Timed (valie)	
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation:	0.07
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Directors or Officers have not been selected, an in	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All addraws	
All others: Signature of an authorized person.	
Signature of an authorized person.	
<u>Fees:</u>	
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

Kin Club, LLC		
(Must	contain the words "Limited Lia	ability Company, "L.L.C" or "LLC.")
ARTICLE II - Add The mailing address		ne principal office of the Limited Liability Company i
Principal Office Ad	dress:	Mailing Address:
13633 Deering Bay Driv	/e, #246	13633 Deering Bay Drive, #246
Coral Gables, FL 3315	8	Coral Gables, FL 33158
The name and the Fl	orida street address of t	the registered agent are:
The name and the FI	orida street address of t	the registered agent are:
The name and the FI	Ronald Rubin	the registered agent are:
The name and the FI -	Ronald Rubin	vame
-	Ronald Rubin N 13633 Decring Bay	vame
-	Ronald Rubin N 13633 Decring Bay	Pame Drive, #246 P.O. Box NOT acceptable) FL 33158
-	Ronald Rubin N 13633 Deering Bay Florida street address (Jame Drive, #246 (P.O. Box <u>NOT</u> acceptable)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	يسا
AMBR	Ronald Rubin
	13633 Deering Bay Drive
	Coral Gables, FL 33158
	-
	_
	
f an effective date is listed, the date m rior to or 90 calendar days after the da ote: If the date inserted in this block does not ma	eet the applicable statutory filing requirements, this date will not be listed as
f an effective date is listed, the date m rior to or 90 calendar days after the da	tust be specific and cannot be more than five business days ate of filing.) eet the applicable statutory filing requirements, this date will not be listed as
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f an effective date is listed, the date make it is a calculated on the date inserted in this block does not must cument's effective date on the Department of Start RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memory of the degree of the de	nte of filing.) eet the applicable statutory filing requirements, this date will not be listed at ate's records. There or an authorized representative of a member, in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State

the

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)