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(F	Requestor's Name)	
(/	Address)	
(<i>i</i>	Address)	
	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(I	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	to Filing Officer:	





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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: SWEET BAY FARM, INC. #500353 (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
USA LEWIS
SWEET BAY FARM
7425 Calvin Cecld
GREVEZAND FC 34736
(City, State and Zip Code) USafine DVINT (Company) E-mail Address: (to be used for future annual response notifications)
For further information concerning this matter, please call: USA US at (352) 459-6584 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$150.00 Filing Fees (\$25 for Conversion and Certificate of Status (\$25 for Articles of Organization) \$150.00 Filing Fees \$185.00
STREET ADDRESS: MAILING ADDRESS:

New Filing Section
Division of Corporations
Clifton Building 2661 Executive Center Circle fallahassee, FL 32301

New Filing Section
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: .50 EET BAY FARM INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of FCOMDA— (Enter state, or if a non-U.S. entity, the name of the country)
on 1990 SEPT 13, 1990 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: SWEET BAY FARM LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (The effective date: 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.) 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 10 day of August	20/7
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: HAG	Title: PRESIDENT
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: LIA LLUS Printed Name: USA LOUIS	
Signature: NACON	100
Printed Name: USA 1800(S	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title
Timod Fullic.	Title.
Signature:	
Printed Name:	Title:
Signature:	TO L
Printed Name:	little:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
-	
Fees:	
Adda CC	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy: Certificate of Status:	\$30.00 (Optional)
Certificate of Status.	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
FREVERAND, FLEGGE XSAMEX
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Usa Lerusis
Name
7425 Calom (PP Rd
Florida street address (P.O. Box NOT acceptable)
_ ERUVE CAMA PC 34736
City Zip
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 al 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
Lisa Leur
Registered Agent's Signature (REQUIRED) (CONTINUED)

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

Title: "AMPD" = Authorized Marshar	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	1-0-
Wanager	115A (Ele)15
MOR	7425 Calvin lee Pmd
111012	GROVETAND FC 34736
(Use attachment if necessary)	
CLE V: Other provisions, if any.	.de de de la composition della composition dell
cest v. Outer provisions, it any.	
REQUIRED SIGNATURE:	1
Line X	levis
	
Signature of a member or a	an authorized representative of a member
any false information submitted in a document	with section 605.0203 (1) (b), Florida Statutes, I am aware t nent to the Department of State constitutes a third degree fel
as provided for in s.817.155, F.S.	and a specific of the continues a limit degree for
as provided for in s.817.155, F.S.	+ WWIS
as provided for in s.817.155, F.S.	ped 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)