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| PICK-UP WAIT MAIL                       |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |
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| (Document Number)                       |  |  |  |  |
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| Certified Copies Certificates of Status |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |
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J. HARRIS

#### **COVER LETTER**

| TO:   | Registration Division of C |  |   |   |
|---|----------------------------|--|---|---|
| SUBJ  | IECT: BLUE LA              | AGOON MIA LLC  |   |   |
| 5015  |                            |  | Limited Liability Compar                  | ny  |
| Limit   |                            | s of Conversion and fo<br>mpany" into an "Othe       | * *                                       |   |
| Please  | e return all corr          | espondence concernin                                 | g this matter to:                         |   |
| KARE  | EN WELNETZ                 |  |   |   |
|   | <del></del>                | Contact Person                                       | <del></del>                               |   |
| OLIV  | ER COMPANIES               | . INC  |   |   |
|   |                            | Firm/Company   |   |   |
| 5713 (  | GRAND AVE ST               | ЕВ   |   |   |
|   |                            | Address  |   |   |
| DULU  | JTH MN 55807               |  |   |   |
|   | (                          | City, State and Zip Code                             |   |   |
| KARE  | en.welnetz@o               | DLIVERCOMPANIES.CO                                   | M   |   |
|   | _                          | be used for future annual i                          |   |   |
| For fi  | ırther informati           | on concerning this ma                                | itter, please call:                       |   |
| KAREN WELNETZ                                 |                            |  | at (218 ) 336                             | 5-1287  |
|   | Name of Contact Person     |  | ```\/                                     | ytime Telephone Number  |
| Enclo   | sed is a check             | for the following amou                               | int:                                      |   |
| □ \$25  | 5.00 Filing Fee            | ☐ \$30.00 Filing Fee<br>and Certificate of<br>Status | □\$55.00 Filing Fee<br>and Certified Copy | ■ \$60.00 Filing Fee.<br>Certified Copy, and<br>Certificate of Status |
| STRE  | STREET ADDRESS:            |  | MAILING                                   | ADDRESS:  |
| Registration Section                          |                            |  | Registration Section                      |   |
|   | ion of Corporat            | ions   | Division of Corporations P. O. Box 6327   |   |
| Clifton Building 2661 Executive Center Circle |                            |  | Tallahassee,                              |   |
| Tallal  | nassee, FL 323             | 01   |   |   |
|   |                            |  |   |   |

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CR2E106 (07/14)

### Articles of Conversion

For

## Florida Limited Liability Company

Into

#### "Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is: **BLUE LAGOON MIA LLC** Enter Name of Florida Limited Liability Company 2. The name of the "Converted or Other Business Entity" is: **BLUE LAGOON MIA LLC** Enter Name of "Converted or Other Business Entity" 3. The "Converted or Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.) organized, formed or incorporated under the laws of MINNESOTA (Enter state, or if a non-U.S. entity, the name of the country) on 8/26/2016 (Date of organization, formation or incorporation) and the formation document is attached (if applicable). 4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S. 5. This conversion shall be effective in Florida on: 11/28/2017 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date of the conversion under the laws governing the "Other Business Entity.") 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.

- 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
  - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

| Street Address:  | 4747 S Washington Ave |         |  |  |  |  |
|--|-----------------------|---------|--|--|--|--|
|  | Titusville, FL 32780  |         |  |  |  |  |
| Mailing Address:   | 4747 S Washington Ave |         |  |  |  |  |
|  | Titusville, FL 32780  |         |  |  |  |  |
| 7. 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                | . 20 17 |  |  |  |  |
| Signature: Xuu Welvel  Must be signed by a Member or Authorized Representative   |                       |         |  |  |  |  |
| Printed Name: Karen Welnetz Title: Secretary   |                       |         |  |  |  |  |
| Fees: Filing Fee: Certified Copy Certificate of S  |                       |         |  |  |  |  |

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