# L1700 248514

(Re	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only

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236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

		WALK IN	
	PICK	CUP: 12/4/17	
	CERTIFIED COPY PHOTOCOPY		
	CUS FILING	Conversion	
	CORPORATE NAME AND DOCUM	Conversion  ures LLC  MENT#)	
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#### **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:  [M1500000605]	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.	c.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of the country)	
October 28, 2011 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
Gardner Ventures 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.	
5. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under see 605,1006 and 605,1061,605,1072, the	

7 DEC -5 AKIII.

Signed this 16th day of November	20 17		
Signature of Authorized Representative of Limited Liability Company:			
Signature of Authorized Representative: Printed Name: Christian S. Bruno	Title: Authorized Representative		
Signature(s) on behalf of Other Business	Entity: [See below for required signature(s)]		
Signature:			
Printed Name: Christian S. Bruno	Title: Authorized Representative		
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature:	(D) 1		
rimed Name.	Title:		
Signature:	Tal		
	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Dire	ector or Officer		
If Directors or Officers have not been selected	ed, an Incorporator must sign.		
If Florida General Partnership or Limited	l Liability Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:		
All others: Signature of an authorized person.			
Fees:			
Articles of Conversion: Fees for Florida Articles of Organiz Certified Copy: Certificate of Status:	\$25.00 zation: \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited L	iability Compan	y is:			
Gardner Ventures LLC					
(Must contain	the words "Limited L	iability Company, "L.L.C.," or "LLC.")	<del></del>		
ABTICLE II ALL					
ARTICLE II - Address: The mailing address and st	rect address of th	ne principal office of the Limited Lia	ability Company is:		
Principal Office Address:		Mailing Address:			
200 S Biscayne Blvd		Same.			
Suite 3000					
Miami, Fl 33131			<del></del>		
(The Limited Liability Company car business entity with an active Flori The name and the Florida s	mot serve as its own l da registration.)	ered Office, & Registered Agent's Registered Agent. You must designate an individual the registered agent are:	Signature: dual or another		
Christian	S. Bruno				
<del></del>	١	lame			
200 S Bi	scayne Blvd, Suite	3000			
		P.O. Box <u>NOT</u> acceptable)			
Miami		FL 33131			
	City	Zip			
registered agent and agre statutes relating to the p	e place designate e to act in this ca roper and compl	nd to accept service of process for the ed in this certificate. I hereby accept to pacity. I further agree to comply with ete performance of my duties, and I as s registered agent as provided for in (	he appointment as h the provisions of all m familiar with and		
Reg	istered Agent's	Signature (REQUIRED)	17		
	(CON	TINUED)	D=C -5		
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The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:  A Boy Named Sue Manager Inc.  200 S Biscayne Blvd, Suite 3000		
"MGR" = Manager MGR			
	Miami, Fl 33131		
	<b>選</b> 11: 3 c		
(Use attachment if necessary)			
ARTICLE V: Other provisions, if any.			
REQUIRED SIGNATURE:			
I his document is executed in accordance w	n authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felony		
Christian S. Bruno, Authorized Representa			
Тур	ed 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)