# L180000 30010

(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone #	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Name	e)		
(Do	ocument Number)			
Certified Copies	_ Certificates of	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



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T. BURCH FEB 5 2018

#### **COVER LETTER**

TO: New Filing S Division of C				
SUBJECT:	CHUCK'S SEAFOOD RES	TAURANT, LLC		
30D3EC1	(Name of Res	ulting Florida Limite	d Com	pany)
				d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corn	espondence concerning	g this matter to:		
David N. Sowerby				
	(Contact Person)			
David N. Sowerby, P.L.				
	(Firm/Company)			
2940 South 25th Street				
	(Address)			
Fort Pierce, FL 34981				
(	City, State and Zip Code)	_		
David@SowerbyPL.cor	n			
E-mail Address: (to	be used for future annual re	port notifications)		
For further informat	ion concerning this ma	tter, please call:		
David N. Sowerby		at ( <sup>772</sup>	464-79	900
(Name of Cont	act Person)		(Dayı	time Telephone Number)
	for the following amount a bank located in the	•	rocess	ed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES New Filing Section Division of Corpora Clifton Building	tions	New Fil Division P. O. Bo	ling Son of Cox 632	orporations 27
2661 Executive Cen	ter Circle	Tallahas	ssee, F	FL 32314

Tallahassee, FL 32301



January 30, 2018

DAVID N. SOWERBY 2940 SOUTH 25TH STREET FORT PIERCE, FL 34981

SUBJECT: CHUCK'S SEAFOOD RESTAURANT, LLC

Ref. Number: W18000009607

We have received your document for CHUCK'S SEAFOOD RESTAURANT, LLC and your check(s) totaling \$180.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 718A00001948

Tim Burch Regulatory Specialist III

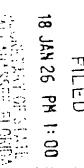
#### **Articles of Conversion**

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.

	he name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: HUCK'S SEAFOOD RESTAURANT, INC.
_	(Enter Name of Other Business Entity)
2. Tł	he "Other Business Entity" is acorporation    (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First	organized, formed or incorporated under the laws of state of Florida (Document # P05000023394)
	(Enter state, or if a non-U.S. entity, the name of the country)
~ 17	February 14, 2005
(d	late of organization, formation or incorporation)
	he name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: HUCK'S SEAFOOD RESTAURANT, LLC
	(Enter Name of Florida Limited Liability Company)
(The the d Note:	not effective on the date of filing, enter the effective date: February 01, 2018.  effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after late this document is filed by the Florida Department of State.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
5. Th	ne 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.

. A HA .	
Signed this 24th day of January	_ 20_18
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: VIII. Printed Name: PETER G. ANGELOS	Title: Manager
Signature(s) on behalf of Other Business Entity:	See below for-required signature(s)
Signature: PETER G. ANGELOS  Printed Name: PETER G. ANGELOS	_ Title: _Director
Signature: Printed Name:	Title:
Signature: Printed Name:	
Signature: Printed Name:	
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

erret ? ·	Name:		
The name of th	e Limited Liability Company	y is:	
CHUCK'S SEAF	FOOD RESTAURANT, LLC		
		ability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - The mailing ad-		e principal office of the Limited Lia	bility Company is:
Principal Offic	ce Address:	Mailing Address:	
822 Seaway Drive	:	2400 S. Ocean Blvd.	
Fort Pierce, FL 34	1949	Unit C-332	
		Fort Pierce, FL 34949	<del></del>
The name and t	the Florida street address of the PETER G. ANGELOS	ne registerett agent are.	
		ame	•
	2400 S. Ocean Blvd., Unit C	227	
		P.O. Box NOT acceptable)	
	Fort Pierce	FL 34949	
	City	Zip	

(CONTINUED)

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

Title:	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager				
MGR	PETER G. ANGELOS			
	2400 S. Ocean Blvd., Unit C-332			
	Fort Pierce, FL 34949			
	<u>.</u>			
	THE T			
	<del></del>			
(Use attachment if necessary)				
CLE V: Other provisions, if any.				
<u></u>				
	a			
REQUIRED SIGNATURE:				
12542 11.	/ tyllo 2			
Signature of a member or	an authorized representative of a member			
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware that			
any false information submitted in a doct as provided for in s.817.155, F.S.	ament to the Department of State constitutes a third degree felon			
as provided for in 8.017.133, P.S.				
PETER G. ANGELOS				
	yped or printed name of signee			

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)