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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

3/27/18

NAME: AK PISCATAWAY ASSOCIATES, I, L.L.C.

TYPE OF FILING: CONVERSION

COST:

180.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

** FILE FIRST X

COVER LETTER

Division of C	orporations			
SUBJECT: AK Pisca	taway Associates, I, L.L.C	··		
50 5 050		sulting Florida Limite	d Company	·)
				es are submitted to convert an "Othe dance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
Joseph M. Landolfi, Jr.,	LL.M.			
	(Contact Person)			
Shapiro, Blasi, Wasserm	an & Hermann, P.A.			
	(Firm/Company)			
7777 Glades Road, Suite	400			
	(Address)			
Boca Raton, FL 33434				
((City, State and Zip Code)			
jlandolfi@sbwh.law				
E-mail Address: (to b	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
Joseph M. Landolfi, Jr., 1	LL.M.	at (⁵⁶¹)	477-7800	
(Name of Conta	ct Person)	(Area Code)	(Daytime	Telephone Number)
	or the following amou a bank located in the		ocessed b	y 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 F and Certified Copy	Cer	\$185.00 Filing Fees, tified Copy, and tificate of Status
STREET ADDRESS	S:	MAILI	G ADD	RESS:
New Filing Section			ng Section	
Division of Corporati	ions		of Corpo	orations
Clifton Building		P. O. Bo	x 6327	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO: New Filing Section

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.

Α	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: K Piscataway Associates, I, L.L.C.
_	(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.)
Fi	irst organized, formed or incorporated under the laws of New Jersey (Enter state, or if a non-U.S. entity, the name of the country)
or	09/06/2002 1 .
	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
A	K Piscataway Associates, I, L.L.C.
	(Enter Name of Florida Limited Liability Company)
(T th No	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.) Dete: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the comment's effective date on the Department of State's records.
5.	The plan of conversion has been approved in accordance with all applicable statutes.
	The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

Signed this 23 day of MARCL	
Signature of Authorized Representative of Lim	ned Liability Company:
Signature of Authorized Representative: Printed Name; Charles Kelenski	Title: Manager
Signature(s) on behalf of Other Business Entity:	
Signature:	
Printed Name: Charles Kolenski	Title: Manager
Signature:	
Printed Name:	
Signature	
Signature:Printed Name:	Title:
0'	
Signature:Printed Name:	Title
	Title.
Signature:	The state of the s
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty 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

ARTICLE I -	Name:		
The name of th	e Limited Liability Company	is:	
AK Piscataway A	ssociates, I, L.L.C.		
	(Must contain the words "Limited Life	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing ad-		e principal office of the Limited	Liability Company is:
Principal Offic	ce Address:	Mailing Address:	
5453-5 N.W. 24th	1 Street	P.O. Box 8721	
Margate, FL 3306		Coral Springs, FL 33075	
·	the Florida street address of the Shapiro, Blasi, Wasserman &	t Hermann, P.A.	18 KAR JEORES N. 1848
	N	ame	ARY SSF
	7777 Glades Road, Suite 400	···	लिल का म
	Florida street address (I	P.O. Box <u>NOT</u> acceptable)	95 7 0
	Boca Raton	FL 33434	
	City	Zip	·
liability co registered ago statutes rela	ompany at the place designate ent and agree to act in this ca ating to the proper and comple e obligations of my position as	d to accept service of process for d in this certificate, I hereby acceptacity. I further agree to comply the performance of my duties, and registered agent as provided for Signature (REQUIRED)	ept the appointment as with the provisions of all d I am familiar with and

(CONTINUED)

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Charles Kolenski
	5453-5 N.W. 24th Street
	Margate, FL 33063
 _	
	
	
(Use attachment if necessary)	
ICI E V. O.L.	
ICLE V: Other provisions, if any.	
	11
///	1 /
REQUIRED SIGNATURE:///	
1///	

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)

Charles Kolenski, Manager