# 118000079843

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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## CT Corp.

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

**Date:** 03/29/2018

	Acc#I20160000072
Name:	Manhattan Art Holdings LLC (DE)
Document #:	
Order #:	10816095
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:	
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Thank you!

#### COVER LETTER

TO:	New Filing Section Division of Corporations
erro i	ECT: MANHATTAN ART HOLDINGS LLC
SUDA	(Name of Resulting Florida Limited Company)
	nclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other ess Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please	return all correspondence concerning this matter to:
Lisa P	echter
	(Contact Person)
	(Firm/Company)
3664 (	Carlton Place
Boca I	(Address) Raton, FL 33496
	(City, State and Zip Code)
lisaped	hter@gmail.com
E-r	nail Address: (to be used for future annual report notifications)
For fu	rther information concerning this matter, please call:
Lisa P	at (561 ) 716-6800
	(Name of Contact Person) (Area Code) (Daytime Telephone Number)
	sed is a check for the following amount: (All checks processed by this office must be payable in US and drawn on a bank located in the United States)
(\$25 fc & \$125	0.00 Filing Fees S155.00 Filing Fees and Certified Copy and Certificate of Status  Status  S180.00 Filing Fees Certified Copy and Certificate of Status  Certificate of Status
New I Divisi Clifto 2661	MAILING ADDRESS:  New Filing Section On of Corporations Division of Corporations Division of Corporations P. O. Box 6327 Executive Center Circle Division of Corporations Tallahassee, FL 32314

INHS11 (7/17)

## 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:  MANHATTAN ART HOLDINGS LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
09/26/2011
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MANHATTAN ART HOLDINGS 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.

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Sigued this day of	_ 20_18	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative: St Printed Name: Lisa V Producer	sa V. Pec Ct. Title: Managing Member	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]	
Signature: Susa V. Per U.		
Printed Name: Lisa V Prainter  Signature: Printed Name:	_ Title: Managing Member	
Signature:	. 0 0	
Printed Name:		
Signature:Printed Name:	m·1	
Printed Name:	Title:	
Signature:Printed Name:	Thata	
Signature: 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 In-	Officer.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		- <del>- 2</del>
Fces:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	29 AM 8:56

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.

		·	*******	
MANHATTAN	ART HOLDINGS LLC			
	(Must contain the words "Limite	d Liability Company, "L.L.C.," or	"LI.C.")	
ARTICLE II	I - Address:			
The mailing a	address and street address o	f the principal office of th	e Limited Liabili	ity Company is:
Principal Of	fice Address:	Mailing Addres	is <u>:</u>	
		<del></del>	_	
3664 Carlton Pl		3664 Carlton Place Boca Raton, FL 33		
Boca Raton, FI	. 33490	Doca Raton, 112 33		
The Limited Lial	II - Registered Agent, Reg oility Company cannot serve as its o with an active Florida registration.)	istered Office, & Regist wn Registered Agent. You must de	ered Agent's Sig esignate an individual	gnature: or enother
The name and	d the Florida street address	of the registered agent are	<b>:</b> :	
	C T Corporation System			
		Name	<del></del>	
	1200 South Pine Island	Pand		
		ss (P.O. Box <u>NOT</u> accept	able)	
			.,	
:	Plantation	FL 33324	<del></del>	
	City	Zip	•	
liability registered ( statutes re	By: Bua TI	nated in this certificate, I has capacity. I further agree implete performance of my in as registered agent as praction System  As	ereby accept the to comply with the duties, and I am j rovided for in Cha Brian Mueller sistant Secretary	appointment as he provisions of all familiar with and apter 605, F.S
	Registered Agen	t's Signature (REQUIRE)	D)	10 to
				TAN TAN
	(CC	ONTINUED)		新 東 20
	•	-		
				- E

Title:	Name and Address:
"AMBR" = Authorized Member	Italic and Addices.
"MGR" = Manager	Vica I/ Part lack Name
Manager	Lisa V. Pechter, Manager
1 11 11 11 11	3644 Carlton Place
	bora Raton, PL 33496
<b>9</b>	0 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
7 who member.	. Suzanne Vandemarde Family 2011
	TYTEWOOD TUST
	CLOMORF LLC,
	225 NE miener Ova. Suite 685
·	Pora Raton, FL 32432
<del></del> ·	
	•
/Use attachment if necessary)	
(Use attachment if necessary)  LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:  WAR V. P. C.	tt
REQUIRED SIGNATURE:  Signature of a member of	or an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance.	nce with section 605,0203 (1) (b). Florida Statistes, I am aware that
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance.	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statistes. I am aware that becoment to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance for in s.817.155, F.S.	nce with section 605,0203 (1) (b). Florida Statistes, I am aware that
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordar any false information submitted in a do as provided for in s.817.155, F.S.  LISA   Peakt	nce with section 605.0203 (1) (b), Florida Statutes. I am aware that ocument to the Department of State constitutes a third degree felony
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REQUIRED SIGNATURE:  Signature of a member	roce with section 605.0203 (1) (b), Florida Statutes. I am aware that becoment to the Department of State constitutes a third degree felony  Typed or printed name of signce  Filing Fees
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordar any false information submitted in a do as provided for in s.817.155, F.S.  LISA / Peakt	Typed or printed name of signce  Filing Fees  s of Organization and Designation of Registered Agent  one)  S 5 00 Certificate of Status (Ontional)
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