

LL2000129805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

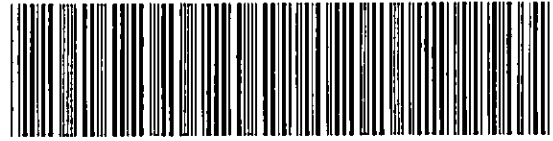
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300337501233

11/27/19--01003--000 \*\*185.00

2019 NOV 27 AM 10:59

2019 NOV 27 AM 10:06

DEC 02 2019

M. SOLOMON

**Sunshine State Corporate Compliance Company**

*3458 Lakeshore Drive, Tallahassee, Florida 32312*

*(850) 656-4724*

DATE 11/27/2019

**\*\*WALK IN\*\***

ENTITY NAME ALTERNATIVE BUSINESS VENTURES LLC

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

*Cert. Copy of Restated Arts & Amends if available. If not provide Cert. Copy of Arts & Amends.*

**\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED 55.00

CHECK # 6941

*Please call Tina at the above number for any issues or concerns. Thank you so much!*

**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:

Alternative Business Ventures LLC

Enter Name of Florida Limited Liability Company

2. The name of the "Converted or Other Business Entity" is:

Alternative Business Ventures LLC

Enter Name of "Converted or Other Business Entity"

3. The "Converted or Other Business Entity" is a limited liability company  
(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 the State of Delaware  
(Enter state, or if a non-U.S. entity, the name of the country)

The formation document is attached.

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: upon filing  
(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.

2019 NOV 27 AM 10:59

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":

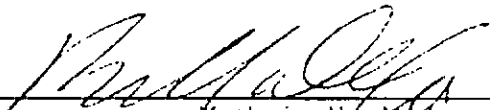
a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address: 3411 Silverside Road Tatnall Building #104  
Wilmington, DE 19810

Mailing Address: 3411 Silverside Road Tatnall Building #104  
Wilmington, DE 19810

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 25 day of November, 2019

Signature:   
Must be signed by a Member or Authorized Representative

Printed Name: Richard DeNapoli Title: Authorized Representative of the Member

**Fees:** Filing Fee: \$25.00  
Certified Copy: \$30.00 (Optional)  
Certificate of Status: \$5.00 (Optional)

2019 NOV 27 AM 10:59  
CL

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND  
CORRECT COPY OF THE CERTIFICATE OF FORMATION OF 'ALTERNATIVE  
BUSINESS VENTURES LLC' FILED IN THIS OFFICE ON THE THIRTY-  
FIRST DAY OF OCTOBER, A.D. 2019, AT 9 O'CLOCK A.M.



7681103 8100F  
SR# 20197831954

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read 'JBullock', is written over a horizontal line. Below the line, the text 'Jeffrey W. Bullock, Secretary of State' is printed in a small font.

Authentication: 203907675  
Date: 10-31-19

**STATE OF DELAWARE  
LIMITED LIABILITY COMPANY  
CERTIFICATE OF FORMATION**

1. The name of the limited liability company is **Alternative Business Ventures LLC**.
2. The address of its registered office in the State of Delaware is **3411 Silverside Road Tatnall Building #104, Wilmington, DE 19810** in **New Castle County**. The name of the registered agent at such address is **Corporate Creations Network Inc.**

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation on the  
30 day of October, 2019.

By: \_\_\_\_\_

Authorized Person

Name: Richard DeNapoli  
Typed or Printed