# L18000131131

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

Office Use Only



200313620132

05/23/18--01023--008 \*\*185.00

18 MAY 23 AM 9: 33
SECRCIARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T SCHROTT

#### **COVER LETTER**

TO:	New Filing So Division of Co				
SHBJ	ECT: Sea Rose	Family, LLC			
3000	<u></u>	(Name of Res	ulting Florida Lim	ited Com	npany)
			_		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this matter to:		
Conra	d Willkomm, Esq.				
		(Contact Person)		_	
Law O	office of Conrad W	illkomm, P.A.			
		(Firm/Company)		_	
3201 5	North Tamiami Tra	il, Second Floor			
	•	(Address)		_	
Naples	k FL 34103				
	((	City, State and Zip Code)		_	
Conra	d@swfloridalaw.co	om			
E-n	nail Address: (to b	e used for future annual re-	port notifications)	_	
For fu	urther informatio	on concerning this ma	tter, please call:		
Conrac	d Willkomm		_at (_ <sup>239</sup>	262-5	3303
•	(Name of Conta	ct Person)	(Area Code	2) (Day	time Telephone Number)
		or the following amou a bank located in the		process	sed by this office must be payable in US
(\$25 fc & \$125	0.00 Filing Fees or Conversion of for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co	_	■\$185.00 Filing Fees. Certified Copy, and Certificate of Status
New I Divisi Clifto 2661	EET ADDRESS Filing Section ion of Corporati n Building Executive Center nassee, FL 3230	ons er Circle	New I Divisi P. O	Filing Son of C Box 632	Corporations

# **Articles of Conversion**

For

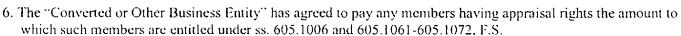
## "Other Business Entity"

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Sea Rose Family Limited Partnership
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited partnership (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
on May 19, 2003  (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Sea Rose Family, 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	20.10	
Signed this 18 day of May	20 <u>_18</u>	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: Cross Printed Name: Marie B. Henriksen	Title: Manager	
Signature(s) on behalf of Other Business Entity: [	See below for required signate	ture(s)
Signature: Marie B. Henriksen  Signature: Marie B. Henriksen	Title: General Partner	
Signature:Printed Name:		
Signature:Printed Name:	Title:	<del></del>
Signature:Printed Name:	_ Title:	
Signature: Printed Name:	_ Title:	
Signature: Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc.  If Florida General Partnership or Limited Liability Signature of one General Partner.  If Florida Limited Partnership or Limited Liability	corporator must sign.	
Signatures of <u>ALL</u> General Partners.	y Charter Farthership.	
All others: Signature of an authorized person.		$\overline{A}_{i,i}$
Fees:		18 M SECRE
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	FILED  18 MAY 23 AM 9: 33 ECRETARY OF STATE LLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	y is:	
Sea Rose Family, LLC		
	iability Company, "L.L.C.," or "LLC.")	<u> </u>
ARTICLE II - Address:		
The mailing address and street address of the	ne principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
252 Kings Highway	8720 Bay Colony Drive, Unit	402
Goose Rocks Beach	Naples, FL 34108	
Kennebunkport, ME 04046		
3201 North Tamiami Trail. Florida street address (	Name Second Floor (P.O. Box NOT acceptable)	
Naples	FL 34103	
City	Zip	
o o	ed in this certificate, I hereby acc apacity. I further agree to compl lete performance of my duties, ar	cept the appointment as ly with the provisions of all nd I am familiar with and

#### ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Marie B. Henriksen
	8720 Bay Colony Drive, Unit 402
	Naples, FL 34108
	<del></del>
	As:
	8 MA ECRE
(Use attachment if necessary)	** ••• <b>*</b>
	ARY SSE
RTICLE V: Other provisions, if any.	mar A
is is a manager managed company. Any manager	may take any action on behalf of the company without
onsent of the members.	may take any action on behalf of the company without
	\$\frac{1}{2}\tag{\frac{1}{2}}

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Marie B. Henriksen

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)