# 11400135905

(F	Requestor's Name)	
(A	Address)	
	Address)	
	,	
(0	City/State/Zip/Phone #)	_
PICK-UP	WAIT	MAIL
(E	Business Entity Name)	
(C	Document Number)	
Certified Copies	Certificates of Sta	tus
Special Instructions to	o Filing Officer:	
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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:

6/1/18

NAME:

WBDELAND, INC.

TYPE OF FILING: CONVERSION

COST:

150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

abbie Hody

### **COVER LETTER**

<b>TO:</b> New Filing S Division of C					
SUBJECT: WBdelan	id, LLC				
Jobs Le I.	(Name of Re	sulting Florida Lim	ted Cor	mpany)	<b>-</b>
				nd fees are submitted to accordance with s. 605.1	
Please return all corr	espondence concernin	g this matter to:			
Rebecca Saferstein, Para	ılegal				
	(Contact Person)		_		
Arnall Golden Gregory I	LLP				
	(Firm/Company)		-		
171 17th Street, NW, Su	ite 2100				
	(Address)		-		
Atlanta, GA 30363					16 JUH-1 PAIZ-5
	City, State and Zip Code)		-		
reps@triadpros.com					<u></u>
E-mail Address: (to b	e used for future annual re	port notifications)	-		CB
For further informati	on concerning this ma	tter, please call:			
Rebecca Saferstein		_at (	\ 870-:	5604	
(Name of Conta	act Person)	(Area Code	) (Daj	ytime Telephone Number)	_
	for the following amou a bank located in the		proces	sed by this office must l	be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□S155,00 Filing Fees and Certificate of Status	□\$180,00 Filing and Certified Co	-	□\$185,00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES	S:	MAIL	ING 2	ADDRESS:	
New Filing Section		New F	iling S	Section	
Division of Corporat	ions			Corporations	
Clifton Building	·	P. O. I			
2661 Executive Cent	er Circle	Tallah	assee.	FL 32314	

Tallahassee, FL 32301

#### **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:  WBdeland, Inc.  D156720433203
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
04/10/2017 on
on $\frac{04/10/2017}{\text{(date of organization, formation or incorporation)}}$
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
WBdeland, 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.)
<u>Note:</u> 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.

\$30.00 (Optional) \$5.00 (Optional)

Certified Copy:

Certificate of Status:

12 JUH-1 PH 12: 5:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLE L. N	
ARTICLE I - Name: The name of the Limited Liability Company is:	
WDJ.J., d 110	
WBdeland, LLC (Must contain the words "Limited Liability	Company, "L.L.C.," or "L.L.C.")
	The state of the s
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
208 John Wesley Way	P. O. Box 121, Greenville, NC 27835
Savannah, GA 31404	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent, You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
NRAI Services, Inc.	
Name	
1200 South Pine Island Road	
Florida street address (P.O.	Box NOT acceptable)
Plantation	FL 33324
City	Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	
	•• <sub>••</sub>

"AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager AMBR	Century Restaurants, Inc.			
AMBR	P. O. Box 121, Greenville, NC 27835			
<del></del>				
	•			
	1.00			
LE V: Other provisions, if any.				
REQUIRED SIGNATURE:	M. C. Bra			
$\Box$	Men C Breun			
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree for			

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-