# L18000137582

(Rec	questor's Name)	
(10)	<b>,</b>	
(Add	dress)	
(Ade	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
/Do	cument Number)	
(50	coment Nomber)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECREBARY OF STATE FALLAHASSEE, FLORIDA

JUN 0 6 2018 T SCHROEDER

#### **COVER LETTER**

TO: Registration : Division of C				
SUBJECT: Sunsport	s Unlimited, LLC			
3000mer	(Name of Res	sulting Florida Limite	d Com	pany)
				d fees are submitted to convert an "Othe ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
David Toback				
	(Contact Person)			
David Toback, Esq.				
	(Firm/Company)			
4511 N. Himes Ave., ST	E. 200			
	(Address)			
Tampa, FL 33614				
(	City, State and Zip Code)			
david@davidtobacklaw.				
E-mail Address: (to b	be used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
David Toback		_at (	)	036
(Name of Cont	act Person)	(Area Code)	(Day	time Telephone Number)
	for the following amou a bank located in the	· ·	ocess	ed by 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	S180.00 Filing and Certified Copy		☐S185.00 Filing Fees. Certified Copy. and Certificate of Status
STREET ADDRES	S:	MAILI	NG A	ADDRESS:
Registration Section		Registra		
Division of Corporat Clifton Building	ions	Division P. O. Bo		orporations 27
2661 Executive Cent	ter Circle			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 Sunsports Unlimited Inc."	Entity" immediately prior to the filing of the Articles of Conversion is:
	Name of Other Business Entity)
2. The "Other Business Entity" is a 2	corporation
Ţ.	Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporat	ed under the laws of Florida
01/01/1995	(Enter state, or it a non-U.S. entity, the name of the country)
On date of organization, formation or incor	poration)
3. The name of the Florida Limited I	Liability Company as set forth in the attached Articles of Organization:
Sunsports Unlimited, LLC	
(Enter Name of	Florida Limited Liability Company)
4. If not effective on the date of filin	g, enter the effective date:
(The effective date: 1) cannot be p date this document is filed by the F date listed in the attached Articles	rior to date of receipt or filed date nor more than 90 days after the lorida Department of State; <u>AND</u> 2) must be the same as the effective of Organization, if an effective date is listed therein.)  not meet the applicable statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been ap	oproved in accordance with all applicable statutes.
	Entity" has agreed to pay any members having appraisal rights the amount to oder ss. 605.1006 and 605.1061-605.1072, F.S.

Page 1 of 2



	• • •
Signed this <u>11<sup>th</sup></u> day of <u>Augus T</u>	20_17
Signature of Authorized Representative of	Limited Liability Company:
Signature of Authorized Representative:	Sand
Printed Name; Samuel J. Castro	Fillox wanager
Signature(s) on behalf of Other Business En	tity: [See below for required signature(s)]
Signature: K J J J J Printed Name: Samuel J. Castro	T'AL Descridant
Printed Name; Sanuer J. Gasuo	Title: Fresiden
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Franted Name.	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Tids
rinied Name:	Title.
Signature:	
Signature:Printed Name:	Title:
YER II C	
<u>If Florida Corporation:</u> Signature of Chairman, Vice Chairman, Direct	or or Officer
If Directors or Officers have not been selected.	
<u>If Florida General Partnership or Limited L</u>	<u> Liability Partnership:</u>
Signature of one General Partner.	
If Florida Limited Partnership or Limited L Signatures of <u>ALL</u> General Partners.	iability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	

Page 2 of 2

\$25.00

\$125.00

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

Articles of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company i	is:				
Sunsports Unlimited, LLC (Must end with the words "Limited Lia	hility Company "L. L. C. " or "L. L. C. "	·\			
(Min end only the words) (Mines )	that company, through in this.	,			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limi	ted Liability Company is:			
Principal Office Address:	Mailing Address:				
361 N. Tessier Dr.	361 N. Tessier Dr.				
St. Pete Beach, FL 33706	St. Pete Beach, FL 33706				
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Regulations entity with an active Florida registration.)  The name and the Florida street address of the	gistered Agent. You must designate a				
The fallic and the Florida street address of the	e regimered agent are.				
Samuel J. Castro					
Na	me				
361 N. Tessier Dr.					
	O. Box NOT acceptable)				
St. Pete Beach	FL 33706				
City	Zip				
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as a Registered Agent's Signature.	I in this certificate. I hereby a acity. I further agree to com te performance of my duties.	iccept the appointment as ply with the provisions of all and I am familiar with and			
(CONT)	INUED)	A MIN TO A M			

Page 1 of 2

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager Samuel J. Castro	361 N. Tessier Dr. St. Pete Beach, FL 33706
Jacquelyn Patti Castro MGL	361 N. Tessier Dr.  St. Pete Beach, Fl. 33706
	ASSEE FLORIDA
	e date of filing: (OPTIONAL)
o or 90 days after the date of filing.)	be specific and cannot be more than five business days prior the applicable statutory filing requirements, this date will not be listed as the 's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	75
This document is executed in a I am aware that any false inform	er or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State y as provided for in s.817.155, F.S.

Typed or printed name of signee

Trui II

Samuel J. Castro

#### 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) Page 2 of 2