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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Čit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

2018 AUG 23 PH 12: 37

TO: New Filing Section

Division of Corporations

THE RESERVE OF STREET OF

SUBJECT: Emerald Coast Centre, LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Kelly Thrasher Fox	
(Contact Person)	•
Hand Arendall Harrison Salo LLC	
(Firm/Company)	•
1801 5th Avenue North, Suite 400	
(Address)	•
Birmingham, Alabama 35203	
(City, State and Zip Code)	-
Park@Grimmerroalty.com	
E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
Kelly Thrasher Fox at (205)502-0122
(Name of Contact Person) (Area Code	(Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles

☐\$155.00 Filing Fees and Certificate of

Status

\$180.00 Filing Fees and Certified Copy

☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status

of Organization)

STREET ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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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: Emerald Const Centre, Ltd.
(limer 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)
Parst organized, formed or incorporated under the laws of
09/30/1988 On .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Emerald Coast Centre, 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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Signed this 22nd day of August	_ 20 <u>18</u> .
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative:	D Minne
Printed Name: Samuel P. Grimmer	Title: Member
Frinted Name, Sander 1. Commune	- I.
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Sulla D. Grinne	
Signature: Printed Name: Samuel P. Grimmer	Tista, Member GRC Management 11 C
Printed Name: Samuel P. Grimmer	Title: Mentuer, One Management, EEC
Signature:	
Printed Name:	Title:
Signature:	(7)
Printed Name:	_ little:
Cignoture	
Signature:Printed Name:	Title:
Timed Name.	
Signature;	
Printed Name:	
Signature:	Tiale
Printed Name:	Titte,
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liability	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
S. S	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
	ene no
Articles of Conversion:	\$25.00 \$135.00
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Optional)
Certified Copy; Certificate of Status:	\$5.00 (Optional)
Comment of Status.	word (Optionar)

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ARTICLE 1 - Name: The name of the Limited Lia	bility Company is	3:			
		•			
Emerald Coast Centre, LLC					
(Must contain th	e words "Limited Linbi	lity Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:					
The mailing address and stre	et address of the	principal office of the Limited Liability Company			
Principal Office Address:		Mailing Address:			
14063 Emerald Coast Parkway		200 Green Springs Highway			
14003 Ememio Coast Parkway		Birmingham, Alabama 35209			
Destin, Florida 32541					
Destin, Florida 32541	Agant Dunistan	Birmingham, Alabama 35209			
Destin, Florida 32541 ARTICLE III - Registered	not sorve us its own Reg n registration.)	ed Office, & Registered Agent's Signature:			
ARTICLE III - Registered (The Limited Liability Company combusiness entity with an active Florid The name and the Florida st	not sorve us its own Reg n registration.)	ed Office, & Registered Agent's Signature:			
ARTICLE III - Registered (The Limited Liability Company combusiness entity with an active Florida St.) The name and the Florida St.	not sorve us its own Reg in registration.)	Birmingham, Alabama 35209 ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another e registered agent are:			
Destin, Florida 32541 ARTICLE III - Registered (The Limited Liability Company combusiness ontity with an active Florid The name and the Florida st. Samuel P	not serve us its own Reg n registration.) reet address of the Grunmor	ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:			
Destin, Florida 32541 ARTICLE III - Registered (The Limited Liability Company combusiness entity with an active Florid The name and the Florida strange Page 14063 En	not serve us its own Reg a registration.) reet address of the Grummor Nat verald Coast Parkway	ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:			
Destin, Florida 32541 ARTICLE III - Registered (The Limited Liability Company combusiness entity with an active Florid The name and the Florida stranged P	not serve us its own Reg a registration.) reet address of the Grummor Nat verald Coast Parkway	ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another exegistered agent are:			
Destin, Florida 32541 ARTICLE III - Registered (The Limited Liability Company combusiness ontity with an active Florida St. Samuel P 14063 En	not serve us its own Reg a registration.) reet address of the Grummor Nat verald Coast Parkway	ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are: O. Box NOT acceptable)			

edall statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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	
AMBR	GRC Management, LLC
	200 Green Springs Highway
	Birmingham, Alabama 35209
•	
AMBR	Samuel P. Grimmer
	200 Green Springs Highway
	Birmingham, Alabama 35209
AMBR	James M. Grimmer
	200 Green Springs Highway
	Birmingham, Alabama 35209
(Use attachment if necessary)	5
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CLE V: Other provisions, if any.	•

REQUIRED SIGNATURE:

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 folse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Samuel P. Grimmer

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)