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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	> #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	 -
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only

DEC 18 2018



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12/12/18--01020--015 **185.00

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: GRANITE GROWTH 1	39, LLC	
()	Name of Resulting Florida Limit	ed Company)
	<u> </u>	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence	concerning this matter to:	
LOUIS J. BOYD		
(Contact Pe	rson)	-
GRANITE ASSOCIATES, INC.		
(Firm/Comp	pany)	-
225 BANYAN BOULEVARD, SUITE	130	
(Addres	s)	-
NAPLES, FL 34102		
(City, State and	Zip Code)	•
dcolavito@granitelp.com		
E-mail Address: (to be used for futu	re annual report notifications)	-
For further information concerning	ng this matter, please call:	
LOUIS J. BOYD	at (at	228-6505
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follow dollars and drawn on a bank local	-	processed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 F and Certifica Status	-	
STREET ADDRESS:	MAIL	ING ADDRESS:
New Filing Section	New Fi	ling Section
Division of Corporations		n of Corporations
Clifton Building 2661 Executive Center Circle		ox 6327 issee, FL 32314
Tallahassee, FL 32301	ा बा।वा।	1380C, 1 L 32314

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: GRANITE GROWTH 139, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of DELAWARE (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
MARCH 15, 2011 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
GRANITE GROWTH 139, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: JANUARY 1, 2019
(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.

Signed this 13th day of November	20/8
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: /www.	in Bark
Printed Name: LOUIS J. BOYD	Title: TREASURER
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: / / / / / / / / / / / / / / / / / / /	
Printed Name: LOUIS J. BOYD //	Title: TREASURER
V	
Signature.	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title
Timed Name.	i itte.
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
<u>If Florida Corporation:</u> Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In	cornorator must sign
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
g s. a., a.a.a. p. c. com	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(M	ust contain the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A			
The mailing addre	ss and street address of t	the principal office of the Limited	Liability Company is:
Principal Office	Address:	Mailing Address:	
225 BANYAN BOU	LEVARD	225 BANYAN BOULEVARD	
SUITE 130		SUITE 130	
NAPLES, FL 3 4102		NAPLES, FL 34102	
business entity with an	active Florida registration.)	Registered Agent. You must designate an in-	F No.
	GRANITE ASSOCIATES	, INC.	1 m , C(2)
		Name	DEC 1
	225 BANYAN BOULEVA	ARD SUITE 130	12 72
		(P.O. Box NOT acceptable)	⊒ .
			<u> </u>
	NAPLES City	FL 34102	9
	City	Zip	
liability comp registered agent statutes relatin	pany at the place designa and agree to act in this c g to the proper and comp digations of my position of	and to accept service of process for ted in this certificate. I hereby acceptapacity. I further agree to comply olete performance of my duties, and as registered agent as provided for Signature (REQUIRED) LOUIS	pt the appointment as with the provisions of all I I am familiar with and in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-
The name and address of each person authorized to manage and control the
Company:

Limited Liability

** A \$ 4D D ** =	
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	LOUIS L DOWN
AWIDK	LOUIS J. BOYD
	GRANITE ASSOCIATES, INC., 225 BANYAN
	BLVD., SUITE 130, NAPLES, FL 34102
	
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature/of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware t
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware tument to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document of the submitted in a d	e with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document of the submitted in a d	e with section 605.0203 (1) (b). Florida Statutes, I am aware t