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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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N. SAMS DEC 18 2018

COVER LETTER

TO: New Filin Division of	g Section of Corporations		
	NITE GROWTH 99, LLC		
SUBJECT:		sulting Florida Limited (Company)
			and fees are submitted to convert an "Othen accordance with s. 605.1045, F.S.
Please return all c	orrespondence concernin	g this matter to:	
LOUIS J. BOYD			
	(Contact Person)		
GRANITE ASSOCI	ATES, INC.		
	(Firm/Company)		
225 BANYAN BOU	LEVARD, SUITE 130		
	(Address)		
NAPLES, FL 34102			
	(City, State and Zip Code)		
dcolavito@granitelp	.com		
E-mail Address: (to be used for future annual re	eport notifications)	
For further inform	nation concerning this ma	atter, please call:	
LOUIS J. BOYD		at (239)22	28-6505
(Name of C	ontact Person)	(Area Code) (1	Daytime Telephone Number)
	ck for the following amou on a bank located in the		ressed by this office must be payable in US
☐ \$150.00 Filing Fe (\$25 for Conversion & \$125 for Articles of Organization)	es S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fee and Certified Copy	s S185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDR New Filing Section Division of Corporation Building 2661 Executive C	on prations	New Filing Division o P. O. Box	f Corporations

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.

(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, or	tc.)
First organized, formed or incorporated under the laws of DELAWARE	
(Enter state, or if a non-U.S. entity, the name of the country)	
JUNE 27, 2007 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	n:
GRANITE GROWTH 99, 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.	
 The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S. 	.О

Signed this 13th day of November	20 <u> /8</u>
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Printed Name: LOUIS J. BOYD	Title: SECRETARY
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: LOUIS J. BOYD Printed Name: LOUIS J. BOYD	, ,
Printed Name: LOUIS J. BOYD	Title: SECRETARY
Signature:	Tisto
Timed Name.	ride
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
Signatura	
Signature: Printed Name:	Title:
Signature: Printed Name:	Tida
Timed Name.	True.
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	Officer.
in phectors of Officers have not occur selected, an mi	corporator must sign.
If Florida General Partnership or Limited Liability	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
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	Ā	RT	10	LF.	Ι-	Na	m	c
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The name of the Limited Liability Company is:

GRAN	ITE	CD	OW	1.1.1	00	1 1	\mathcal{C}
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(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
225 BANYAN BOULEVARD	225 BANYAN BOULEVARD
SUITE 130	SUITE 130
NAPLES, FL 3 4102	NAPLES, FL 34102

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

GRANITE ASSOCIATE	ES, INC.		_ _
	Name	_	(E)
225 BANYAN BOULEY	VARD, SUITE 130		 رئ
Florida street addres	ss (P.O. Box NOT acceptable)		TD
NAPLES	FL 34102		လ
City	Zip		<u>က</u> (၁

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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) LOUIS J. BOYD, SECY

(CONTINUED)

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

LOUIS J. BOYD
GRANITE ASSOCIATES, INC., 225 BANYAN
BLVD., SUITE 130, NAPLES, FL 34102
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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.

LOUIS J. BOYD, SECRETARY

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)