L18000267547

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only

K. PAGE DEC 18 2018



700321594547

12/13/18--01020--005 **185.00

18 DEC 13 PH 2: 48

COVER LETTER

Division of C	Corporations			
SUBJECT: LOOMIS	INVESTMENT 16, LLC			
<u></u>		sulting Florida Lir	nited Con	npany)
		-		nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to):	
LOUIS J. BOYD				
	(Contact Person)			
GRANITE ASSOCIATE	ES, INC.			
	(Firm/Company)			
225 BANYAN BOULE	VARD, SUITE 130			
	(Address)			
NAPLES, FL 34102				
	City, State and Zip Code)			
dcolavito@granitelp.com	n			
E-mail Address: (to b	e used for future annual re	port notifications))	
For further informati	on concerning this ma	tter, please call	l:	
LOUIS J. BOYD		_at () 228-6	5505
(Name of Conta	nct Person)	(Area Coo	de) (Day	rtime Telephone Number)
	for the following amou a bank located in the	•	s process	sed 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	□\$180.00 Filinand Certified C	_	■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAI	LING A	ADDRESS:
New Filing Section			Filing S	
Division of Corporations Division of Corporations Clifton Building P. O. Box 6327		<u>-</u>		
Clifton Building		r. O.	DOX OO	2 I

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO: New Filing Section

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 i LOOMIS INVESTMENT 16, LLC	s:
(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 trus	t, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of the country)	
FEBRUARY 18, 2016 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizati	ion:
LOOMIS INVESTMENT 16, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: [The effective date:	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days a 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 to 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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	at to

Signed this 15th day of November	20/8	
Signature of Authorized Representative of Limited Liability Company:		
Signature of Authorized Representative: Printed Name: ADAM GERRY	Title: MANAGER	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: Printed Name: ADAM GERRY	TEAL MANAGER	
Signature:Printed Name:	Title:	
Signature:Printed Name:		
Signature:Printed Name:		
Printed Name:	Title:	
Signature: Printed Name:	Title:	
Signature:		
Signature: Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	s:	
LOOMIS INVESTMENT 16, LLC		
(Must contain the words "Limited Liabi	ility 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, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the GRANITE ASSOCIATES, INC.	gistered Agent. You must designate an incere control of the contro	dividual or another
Nar		2 Sept. 2 2
225 BANYAN BOULEVARD	D, SUITE 130	
Florida street address (P.	O. Box NOT acceptable)	PH 2: 48 PH 2: 48 F, FLORID
NAPLES	FL 34102	Ωπ. ∞ »
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as recept the Registered Agent's Si	in this certificate, I hereby acceracity. I further agree to comply e performance of my duties, and registered agent as provided for gnature (REQUIRED) LOUI	ept the appointment as with the provisions of all I am familiar with and in Chapter 605, F.S

ARTICLE IV-

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

"MGR" = Manager MGR ADAM GERRY GRANITE ASSOCIATES, INC., 225 BANY BLVD., SUITE 130, NAPLES, FL 34102 (Use attachment if necessary) CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member or an any false information submitted in a document to the Department of State constitutes a third de as provided for in s.817.155, F.S.	tle:	Name and Address:		
MGR ADAM GERRY GRANITE ASSOCIATES, INC., 225 BANY BLVD., SUITE 130, NAPLES, FL 34102 (Use attachment if necessary) CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member or	MBR" = Authorized Member			
(Use attachment if necessary) CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of a membe				
(Use attachment if necessary) CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of this document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am any false information submitted in a document to the Department of State constitutes a third de as provided for in s.817.155, F.S.	<u> </u>	ADAM GERRY		
(Use attachment if necessary) CLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of this document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am any false information submitted in a document to the Department of State constitutes a third de as provided for in s.817.155. F.S.		GRANITE ASSOCIATES, INC., 225 BANYAN		
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of		BLVD., SUITE 130, NAPLES, FL 34102		
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of	-			
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of		- 		
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of				
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of	ee attachment if nocassary)	<u> </u>		
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member of this document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am any false information submitted in a document to the Department of State constitutes a third deas provided for in s.817.155, F.S.	se attachment it necessary)	6 <u>.</u>		
Signature of a member or an authorized representative of a member of state of a member of state information submitted in a document to the Department of State constitutes a third deas provided for in s.817.155, F.S.		· · · · · · · · · · · · · · · · · · ·		
Signature of a member or an authorized representative of a member of state of a member of state information submitted in a document to the Department of State constitutes a third deas provided for in s.817.155, F.S.	V: Other provisions, if any.			
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 any false information submitted in a document to the Department of State constitutes a third deas provided for in s.817.155, F.S.	processor and			
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 any false information submitted in a document to the Department of State constitutes a third deas provided for in s.817.155, F.S.				
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 any false information submitted in a document to the Department of State constitutes a third deas provided for in s.817.155, F.S.				
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 any false information submitted in a document to the Department of State constitutes a third deas provided for in s.817.155, F.S.				
This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am any false information submitted in a document to the Department of State constitutes a third de as provided for in s.817.155, F.S.	EQUIRED SIGNATURE:_			
This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am any false information submitted in a document to the Department of State constitutes a third de as provided for in s.817.155, F.S.				
This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am any false information submitted in a document to the Department of State constitutes a third de as provided for in s.817.155, F.S.				
any false information submitted in a document to the Department of State constitutes a third de as provided for in s.817.155, F.S.	Signature of a member or an a	authorized representative of a member		
as provided for in s.817.155, F.S.	This document is executed in accordance with	section 605.0203 (1) (b), Florida Statutes. I am aware that		
	as provided for in s.817.155, F.S.	to the Department of State constitutes a third degree felon		
ADAM GERRY, MANAGER				
Typed or printed name of signee	ADAM GERRY, MANAGER			

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)