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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of S	Status
Special Instructions to	Filing Officer:	

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ALL AFFASSEE, FLORIDA

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T SCHROEDER

COVER LETTER

Division of C					
SUBJECT: LOOMIS	INVESTMENT 29, LLC				
30b3EC1.	(Name of Res	ulting	Florida Limite	d Con	npany)
The enclosed Articles Business Entity" into	s of Conversion, Artic a "Florida Limited Li	les o abili	f Organizatio ty Company	on, an in ac	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this	s matter to:		
LOUIS J. BOYD					
	(Contact Person)				
GRANITE ASSOCIATE	S. INC.				
-	(Firm/Company)				
225 BANYAN BOULEV	ARD, SUITE 130				
	(Address)				
NAPLES, FL 34102					
((City, State and Zip Code)				
dcolavito@granitelp.con	1				
E-mail Address: (to b	e used for future annual re	port n	otifications)		
For further information	on concerning this ma	tter.	please call:		
LOUIS J. BOYD		at ((239	228-6	5505
(Name of Conta	ct Person)			(Day	time Telephone Number)
	or the following amou a bank located in the		•	rocess	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 Filing I I Certified Copy		■\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRESS New Filing Section Division of Corporat Clifton Building 2661 Executive Cent	ions		New Fil Division P. O. Bo	ling S n of C ox 63	Corporations

Tallahassee, FL 32301

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: LOOMIS INVESTMENT 29, 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.)
(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)
on MAY 3, 2017 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: LOOMIS INVESTMENT 29. 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.



Signed this 15th day of Novem	ber 20 18.
Signature of Authorized Representative of	of Limited Liability Company:
Signature of Authorized Representative:	
Signature of Authorized Representative:	
runted Name: ADAM ORKET	Title: MANAGER
Signature(s) on behalf of Other Rusiness F	ntity: See below for required signature(s)
	nuty. (See below for required signature(s))
Signature: Printed Name: ADAM GERRY	
Printed Name: ADAM GERRY	Title: MANAGER
Signature:	
Printed Name:	Title:
Printed Name:	Title:
Timed Patrice.	Fide:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title;
Printed Name:	Title:
rimed Name.	litle:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Direc	tor or Officer
If Directors or Officers have not been selected	an Incorporator must sign
	t and the state of portation in the state of
If Florida General Partnership or Limited	Liability Partnership:
Signature of one General Partner.	
ICTU CLEAN AND AND AND AND AND AND AND AND AND A	
If Florida Limited Partnership or Limited I	<u> Liability Limited Partnership:</u>
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
C Production	į

Fees: Articles of Conversion: \$25.00 Fees for Florida Articles of Organization:

\$125.00 Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N	Name:		
The name of the	ELimited Liability Compan	y is:	
LOOMIS INVEST		1175 (1 20 17 17 17 17 17 17 17 17 17 17 17 17 17	
	(Must contain the Words "Elmited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II -	Address:		
The mailing add	fress and street address of th	ne principal office of the Limite	d Liability Company is:
Principal Office	e Address:	Mailing Address:	
225 BANYAN BO	DULEVARD	225 BANYAN BOULEVAR	D
SUITE 130		SUITE 130	
NAPLES, FL 3 41	02	NAPLES, FL 34102	
(The Limited Liability business entity with	y Company cannot serve as its own I an active Florida registration.) ne Florida street address of t	ered Office, & Registered Age Registered Agent. You must designate an i	individual or another
	GRANITE ASSOCIATES,	INIC	18 C SEC
	· · · · · · · · · · · · · · · · · · ·	lame	DEC 13 CRETARY LAHASS
	1,	Tanne	TILE!
	225 BANYAN BOULEVAL	RD, SUITE 130	
	Florida street address (P.O. Box NOT acceptable)	
	NAPLES	FL 34102	AHTI: 51
	City	Zip	%
liability coi registered age statutes relai	mpany at the place designate ont and agree to act in this calling to the proper and complete obligations of my position at the Registered Agent's	nd to accept service of process for in this certificate. I hereby acceptainty. I further agree to complete performance of my duties, as segistered agent as provided for Signature (REQUIRED) LOU	cept the appointment as ly with the provisions of al ad I am familiar with and or in Chapter 605, F.S
	(CON	CINUFD)	

A	R	T`T	C	LE	11	V.
7 1			•			, –

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 MGR	ADAM GERRY
	GRANITE ASSOCIATES, INC., 225 BANYAN BLVD., SUITE 130, NAPLES, FL 34102
	
(Use attachment if necessary)	DEC 13
TCLE V: Other provisions, if any,	
	00 : 5 00 : 5
REQUIRED SIGNATURE:	

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.

ADAM GERRY, MANAGER

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)