# 119000051217

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

Office Use Only



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## **Filing Cover Sheet**

To:	Florida	Division	of Cor	porations
10.	ilolida	DIVISION	01 001	PO10010113

From: TAYLOR SEAY C/O Capitol Services, Inc.

Date: 2/26/2019

Trans#: 1003243

Entity Name: DOUGLAS PIKE ASSOCIATES, LLC (RI) CONVERTING INTO		2.3	and the second second	يىن .	JC 1 GO
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## OUGLAS PIKE ASSOCIATES, LLC (FL)

Articles Incorporation ( )	Articles of Amendment ( )
Articles of Dissolution ( )	Annual Report ( )
Conversion (XX)	Fictitious Name ( )
Foreign Qualification ( )	Limited Liability ()
Limited Partnership ()	Merger ( )
Reinstatement ( )	Withdrawal / Cancellation ( )
Other ( )	

STATE-FEES PREPAID WITH CHECK#1444 FOR \$180.00

### **PLEASE RETURN:**

Certified Copy (XX) Plain Photocopy ()

Good Standing ( ) Certificate of Fact ( )

#### **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: Douglas Pike Associates, 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)
April 27, 1993
April 27, 1993 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Douglas Pike Associates, 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 filling 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 t	his <u>22nd</u>	_ day of _	February		20 <u>19</u>		
Signatu	re of Author	rized Rep	resentative	كالمتجمر	7	ty Compa	inv:
Sionatur	e of Authori	zed Renne	sentative	1. S. J. J.	a_		
Printed 1	Name: Axel S	tepan	.seriairi e.		Title: Ma	nager	<del></del>
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Signatur	re(s) on beha	If of Othe	r Business	Entity:  5	see below I	for requir	ed signature(s)]
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Signatur	e: Name: Axel S	ienan			Title: Ma	naoer	
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If Direct	ors or Office	rs have no	t been selec	ted, an Inc	orporator n	nust sign.	
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All other							
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Fees:				•			
	Articles of Co	anversion:			\$25.00		
	ces for Flori			ization:			
	Certified Cop		Or Earl	IZAKIUII.	\$30.00 (C	mtional)	
	Certificate of				\$5.00 (Op		
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SECRETARY OF STATE ALLAHASSEF. FLORID:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited L	iability Company is:			
Douglas Pike Associates, (Must contain		y Company, "L.L.C.," or "LLC.	<del>")</del>	
ARTICLE II - Address: The mailing address and st	reet address of the pr	rincipal office of the Lin	nited Liability Co	ompany is:
Principal Office Address	i	Mailing Address:		
701 Northpoint Parkway, West Palm Beach, FL 33		701 Northpoint Parky West Palm Beach, FL		
ARTICLE III - Registere (The Limited Liability Company co- business entity with an active Flor The name and the Florida	mnot serve as its own Regis ida registration.)	tered Agent, You must designate	Agent's Signatu	Ire: ther
В&С	Corporate Services,	Inc.	SE	19
<del></del>	Nam		CRE AH	<u>L</u>
	h Biscayne Boulevar la street address (P.C	rd, 21st Floor D. Box <u>NOT</u> acceptable)	ASSEE.	26
Miant	i	FL 33131	FI S	ED 3
	City	Zip		# (ii)
liability company at t registered agent and agr statutes relating to the	he place designated in ee to act in this capac proper and complete	o accept service of proce n this certificate, I hereby city. I further agree to co performance of my duties	vaccept the appo emply with the pro s, and I am famili	intment as ovisions of all iar with and

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			
MGR	Axel Stepan	_	
	701 Northpoint Parkway, Suite 210	-	
	West Palm Beach, FL 33407	-	
		-	
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TICLE V: Other provisions, if any.	OF A	<b>\$</b>	•
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	_ <del></del>		
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REQUIRED SIGNATURE			
#X			
		-	
Signature of a member of a	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware t	hai	
any false information submitted in a docum	nent to the Department of State constitutes a third degree fel	lonv	
as provided for in s.817.155, F.S.		•	
Augl Chann			
Axel Stepan	ped or printed name of signee	-	
131	Filing Fees		
	randy fres		

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)