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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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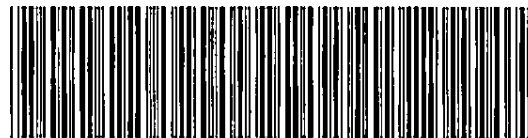
(Business Entity Name)

(Document Number)

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Shutts & Bowen LLP  
1100 CityPlace Tower  
525 Okeechobee Boulevard  
West Palm Beach, Florida 33401  
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FAX (561) 822-5505  
EMAIL rbagatell@shutts.com

February 25, 2019

**VIA FEDEX**

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: CRICQ Coral Springs Trust/Conversion to CRICQ Coral Springs, LLC**

Dear Sir or Madam:

Articles of Conversion for CRICQ Coral Springs Trust into CRICQ Coral Springs, LLC, a Florida Limited Liability Company, together with the Articles of Organization of CRICQ Coral Springs, LLC are enclosed for filing. Also enclosed is our check in the amount of \$180.00 in payment of the filing fees (\$150.00) and a certified copy of the documents (\$30.00). Please return the certified copy to our office in the return FedEx envelope.

If you have any questions, please feel free to contact me.

Thank you for your assistance.

Sincerely,

Shutts & Bowen LLP

Rikki Lober Bagatell

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TALLAHASSEE, FLORIDA

Enclosures

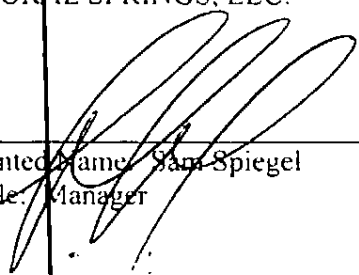
cc: Simone Spiegel, Esq.

**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 Section 605.1045, Florida Statutes:

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is **CRICQ CORAL SPRINGS TRUST**. **D98-1**
2. The "Other Business Entity," CRICQ CORAL SPRINGS TRUST, is a Delaware Business Trust and was first organized, formed or incorporated under the laws of the State of Delaware on January 7, 1998.
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization is CRICQ CORAL SPRINGS, LLC. The effective date of these Articles is as of the date of filing.
4. The Plan of Conversion has been approved in accordance with all applicable statutes.
5. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under Sections 605.1006 and 605.1061-605.1072, Florida Statutes.

Signature of Authorized Representative of CRICQ CORAL SPRINGS, LLC:

  
\_\_\_\_\_  
Printed Name: Sam Spiegel  
Title: Manager

Signature on behalf of Other Business Entity (CRICQ CORAL SPRINGS TRUST):

  
\_\_\_\_\_  
Printed Name: Sam Spiegel  
Title: Administrative Trustee

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**TALLAHASSEE**

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

**ARTICLE I – NAME**

The name of the limited liability company is

CRICQ CORAL SPRINGS, LLC (the “Company”)

**ARTICLE II – ADDRESS**

The mailing address and address of the principal office of the Company is:

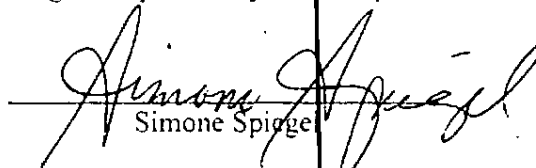
455 Fairway Drive, Suite 301  
Deerfield Beach, FL 33441

**ARTICLE III – REGISTERED AGENT AND REGISTERED OFFICE**

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

Simone Spiegel  
455 Fairway Drive, Suite 301  
Deerfield Beach, FL 33441

*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.*

  
Simone Spiegel

**ARTICLE IV – MANAGERS**

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

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TALLAHASSEE, FLORIDA

Title

Name and Address

Manager

Sam Spiegel  
455 Fairway Drive, Suite 301  
Deerfield Beach, FL 33441

Manager

Simone Spiegel  
455 Fairway Drive, Suite 301  
Deerfield Beach, FL 33441

REQUIRED SIGNATURE:

Signature of a member or an authorized  
representative of a member

Typed or printed name of signee

Sam Spiegel

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SECRETARY OF STATE  
TALLAHASSEE, FL 32311