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(Re	equestor's Name)	
(Address)		
(Ad	dress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(8u	siness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	_
A18	335	

Office Use Only



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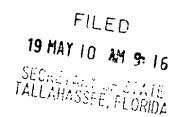
COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Family Property (Name of Resulting	Partners, LLC ng Florida Limited Company)
	of Organization, and fees are submitted to convert an "Other lity Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning th	is matter to:
Bryan Meyer (Contact Person)	
(Firm/Company)	
1530 Miracle Strip Park (Address) Unit 2	Way SE
Fort Waltonbeach FL 3254 (City. State and Zip Code)	<u>-8</u>
E-mail Address: (to be used for future annual report	notifications)
For further information concerning this matter,	. please call:
Bryan Meyer at (Name of Contact Person)	(314) 882. 2733 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: dollars and drawn on a bank located in the Uni	(All checks processed by this office must be payable in US ted States)
	IS180.00 Filing Fees
STREET ADDRESS:	MAILING ADDRESS:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
•	
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32314

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Family Property Partners, 1 P (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>limited Partnership</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on Aug. 17, 2018 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Family Property Partners, UC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 100 (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.

Signature of Authorized Representative of Limited Liability Compan	1 <u>Y:</u>
Since the state of	
Signature of Authorized Representative: Printed Name: Bryan Weyer Title: manages	- /
Timed Name. Digate 1948	
Signature(s) on behalf of Other Business Entity: See below for required	d signature(s)
Signature: Plum	
Printed Name: Byan Neyer Title: president	/ Parties
74 pM	
Signature:	
Signature:	<u>w</u>
Signature:	
Signature: Title:	
Signature: Title:	
Timed (value)	
Signature:	
Signature: Title:	
Signature: Title:	
runted mame; Title:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or Officer.	
If Directors or Officers have not been selected, an Incorporator must sign.	
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.	
Signature of the General Farther.	
If Florida Limited Partnership or Limited Liability Limited Partnership):
Signatures of ALL General Partners.	_
All of	
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: The name of the Limited Liability Company is:
Family Property Partners, LLC (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:
Family Property Partners, L.C. Family Property Partners, L.C. 2159 Welson Industrial Ct. St. Louis, MO 63146 St. Louis, MO 103146
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:
Bryan Meyer Name 1530 Miracle Strip Parkway & unit 207B Florida street address (P.O. Box NOT acceptable)
1530 Miracle Styp Parkway & unit 207B Florida street address (P.O. Box NOT acceptable)
Fort Walton Beach FL 32548 FF 5
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)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = ManagerMGR	Bryan Meyer
	2159 Welsch Industrial Ct. St. Louis, Mo 63146
_MGR	Jeff Meyer 2159 Welsch Industrial Ct St. Louis, Mo 163146
	SE CITY NAT
(Use attachment if necessary)	SSTEE TO
CLE V: Other provisions, if any.	M 9-16
REQUIRED SIGNATURE:	
- 70 cm	5
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Bryan	Mayer
Ty	ped or printed name of signee
	Filing Fees Of Organization and Designation of Registered Agent

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