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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Busiless Efficy Name)
(Document Number)
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CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

COVER LETTER

TO:	Registration Division of (
SURJ	FCT: Rosemar	y WPB Holdings, LLC		
ОСБ			a Limited Liability Compar	ny
Limite			ee(s) are submitted to er Business Entity" in a	
Please	return all con	respondence concernii	ng this matter to:	
		Contact Person		
		Firm/Company		
		Address		
<u> </u>	(City, State and Zip Code		
E	-mail address: (to	be used for future annual	report notification)	
For fu	rther informati	on concerning this ma	ntter, please call:	
		·	at ()	
N	ame of Contact P	erson	Area Code and Day	vtime Telephone Number
Enclos	sed is a check t	for the following amou	unt:	
□ \$ 25	.00 Filing Fee	☐ \$30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee. Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

CR2E106 (05/17)

Articles of Conversion

For

Florida Limited Liability Company

Into

"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Business Entity" is:	Other	
ROSEMARY WPB HOLDINGS, LLC	7 <u>1</u> 038	2021
Enter Name of Florida Limited Liability Company	RETA	2021 AUG -
2. The name of the "Converted or Other Business Entity" is:	77.7	9
ROSEMARY WPB HOLDINGS, LLC	SSE	.7
Enter Name of "Converted or Other Business Entity"	715	۵: م:
3. The "Converted or Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership business trust, etc.)	, common I	
organized, formed or incorporated under the laws of	se of the co	untry
4. The plan of conversion was approved by the converting Florida Limited L Company in accordance with Chapter 605, F.S.	.iability	
5. This conversion shall be effective in Florida on: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by Department of State; AND 2) must be the same as the effective date of the conversion under the laws g "Other Business Entity.")		
Note: If the date inserted in this block does not meet the applicable statutory filing requirem	ents, this	date

will not be listed as the document's effective date on the Department of State's records.

- 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
 - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street	Address:	613 NW 3rd Av	enue, Suite 104				
Fort Lauderdale, FL 33311							
Mailing Address: 613 NW 3rd Avenue, Suite 104							
		Fort Lauderdale	FL 33311				
app		amount to wh	s Entity" has agreed to pich such members are er				
Signed thisday of					. 20		
Signat	ure:	Must be sig	gned by a Member or Authorized	J Representative			
Printe	d Name: Jeffrey	Burns	Title: M W	nage		.	
Fees:	Filing Fee: Certified Copy Certificate of S		\$25.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2	U	SECRETARY OF STA		
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