119000184377

(Requestor's Name)
(Address)
(Address)
(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

R KEMPLE
JUL 31 2019



600332556826

07/31/19--01001--005 **150.00

19 JUL 20 PM 2:58

9 JUL 30 AM 9: 47

C	CORPORATE WAS ACCESS,	hen you need ACCESS to the world			
	P.O. Box 37066 (323)				
		WALK IN			
	PICK U	JP: 7/30/19			
	CERTIFIED COPY				
Ø	РНОТОСОРУ				
	CUS				
Ø.	FILING	Conversion			
	COASTAL CONST	Ruction of Central Florida, L			
	(CORPORATE NAME AND DOCUMENT	Τ#)			
	(CORPORATE NAME AND DOCUMENT	Γ#)			
	(CORPORATE NAME AND DOCUMENT	Γ#)			
	(CORPORATE NAME AND DOCUMENT	7#)			
	(CORPORATE NAME AND DOCUMENT	T#)			

1.

2.

3.

4.

5.

6.

SPECIAL INSTRUCTIONS:

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Coastal Construction of Central Flo	lorida, LLC
	desulting Florida Limited Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited I Please return all correspondence concerning	icles of Organization, and fees are submitted to convert an "Othe Liability Company" in accordance with s. 605.1045, F.S.
riode rotain an correspondence concerni	ng this matter to:
Charles J. Duffy, Esq.	
(Contact Person)	
Katz Barron	
(Firm/Company)	
100 NE 3rd Ave., Suite 280 (Address)	
Fort Lauderdale, FL 33304	
(City, State and Zip Code)	
cjd@katzbarron.com	
E-mail Address: (to be used for future annual re	eport notifications)
For further information concerning this ma	atter, please call:
Charles J. Duffy, Esq.	at (954) 522-3636
(Name of Contact Person)	at () 522-3636 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the	unt: (All checks processed 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 Fees and Certified Copy □\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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: Coastal Construction of Central Florida, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation
(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)
January 29, 2008 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Coastal Construction of Central Plorida, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: July 31, 2019
(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.

19 JUL 30 AH 9: 17

Signed this 26th day of July	20_19
Signature of Authorized Representative of Lin	
Signature of Authorized Representative: Printed Name: Charles J. Duffy, Esq.	Title incorporator
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: Thomas C. Murphy	Title: Vice President
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabili	corporator must sign.
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

FILED 19 JUL 30 AM 9: 47

ARTICLES OF ORGANIZATION FOR I	FLORIDA LIMITED LIABI	LITY COMPANY
ARTICLE I - Name:		
The name of the Limited Liability Company i	is:	
Coastal Construction of Central Florida, LLC		
(Must contain the words "Limited Liabi	ility Company, "L.L.C.," or "LLC.")	
	,	
ARTICLE II - Address:		- 4 4 4-4
The mailing address and street address of the	principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
5959 Blue Lagoon Drive	5959 Blue Lagoon Drive	
Suite 200	Suite 200	
Miami, FL 33126	Miami, FL 33126	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You must designate an indi	ividual or another
James E. Moye		
Nam	ne	
5959 Blue Lagoon Drive, Suite	200	
Florida street address (P.O.		
Miami	FL 33126	
City	Zip	
Having been named as registered agent and a liability company at the place designated it registered agent and agree to act in this capac statutes relating to the proper and complete accept the obligations of my position as re	n this certificate, I hereby accep city. I further agree to comply w performance of my duties, and l gistered agent as provided for it	t the appointment as with the provisions of all I am familiar with and
		- 5
(CONTIN	(UED)	
		FILED L30 MM

ARTICLE IV-

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

"MGR" = Manager AMBR	Sean DeMartino
	5959 Blue Lagoon Drive, Suite 200
	Mimai, FL 33126
MGR	Dan Whiteman
	5959 Blue Lagoon Drive, Suite 200
	Mimai, FL 33126
MGR	Thomas P. Murphy
	5959 Blue Lagoon Drive, Suite 200
	Mimai, FL 33126
MGR	Sean M. Murphy
	5959 Blue Lagoon Drive, Suite 200
	Mimai, FL 33126
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
ited liability company is a manager manage	d limited liability company

Signature of a member or an authorized representative of a member. 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.

Charles J. Duffy, Esq.

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)