L19000301589

(Requestor's Name)
(Address)
(Address)
(City(Chaba Zin)Chana 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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SECRETARY OF STATE TALLAHASSEE, FLORIOS

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K Brumpley

COVER LETTER

(Name of Resulting Florida Limited Company)

			nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.			
Please return all corr	espondence concernin	g this matter to:				
JAMIE KOUMOUNDO	UROS					
	(Contact Person)					
PETER MAKRIS CPA						
	(Firm/Company)					
2110 DREW STREET						
	(Address)					
CLEARWATER, FL 33	765					
	City, State and Zip Code)					
E-mail Address: (to b	be used for future annual re	port notifications)				
For further informati	on concerning this ma	tter, please call:				
JAMIE KOUMOUNDO	_	at (⁷²⁷) ⁴⁴⁶⁻⁰	0000			
(Name of Conta	act Person)	(Area Code) (Day	ytime Telephone Number)			
	or the following amou a bank located in the		sed 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	☐S185.00 Filing Fees, Certified Copy, and Certificate of Status			
STREET ADDRES	S:	MAILING A	ADDRESS:			
New Filing Section			New Filing Section			
Division of Corporations		Division of Corporations				
Clifton Building	on Circula	P. O. Box 6327				
2661 Executive Center Circle		t allanassee	Tallahassee FI 32314			

Tallahassee, FL 32301

New Filing Section

Division of Corporations

 $\textbf{SUBJECT:} \ \underline{^{\text{BASS LAKE PLAZA, LLC.}}}$

TO:

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: BASS LAKE PLAZA, 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.
(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)
02/01/1999
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BASS LAKE PLAZA, ELC.
(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 filing requirements, this date will not be fisted 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.

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SECRETARY OF STATE
TALLAHASSEF E

Signed	this 29TH	day of JULY		_ 20_19	
Signat	ture of Authori	zed Representative o	of Limit	ted Liability Company:	
Signat Printec	ure of Authorize I Name: <u>PETER N</u>	ed Representative: IAKRIS		Title: MGR	_
Signat	ure(s) on behalf	f of Other Business E	ntity: [See below for required signature(s)	
Signatu Printed	ure:	1AKRIS		Title: PD	_
					-
Printed	are: I Name:			_ Title:	- -
Signati Printed	are: I Name:			_ Title:	_
					-
Printed	Name:			Title:	- -
Signati Printed	ure: Name:			_ Title:	<u>-</u>
Signati	ire:				
Printed	Name:		-	_ Title:	-
Signati		n: Vice Chairman, Direc have not been selected			
	ida General Par ire of one Gener	rtnership or Limited al Partner.	<u>Liabilit</u>	y Partnership:	
	ida Limited Par ires of <u>ALL</u> Gen		<u>Liabilit</u>	y Limited Partnership:	
All oth Signati	ers: ire of an authoriz	zed person.			
Fees:					
	Articles of Con Fees for Florida Certified Copy Certificate of S	a Articles of Organiza :	ition:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Cor	nnany is:
The mane of the Emmed Edding Col	npany is.
BASS LAKE PLAZA, LLC.	
(Must contain the words "Lin	nited Liability Company, "L.L.C.," or "LLC,")
ARTICLE II - Address: The mailing address and street address Principal Office Address:	s of the principal office of the Limited Liability Company is: Mailing Address:
2110 DREW STREET	2110 DREW STREET
CLEARWATER, FL 33765	CLEARWATER, FL 33765
A DETICUE IVI. D	

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:

PETER MAKRIS		
Nar	ne	
2110 DREW STREET		
Florida street address (P.	O. Box <u>NO</u>	T acceptable)
CLEARWATER	FL	33765
City		Zip

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" = Manager	DETERMINATION OF THE PROPERTY
MGR	PETER MAKRIS
	2110 DREW STREET
	CLEARWATER, FL 33765
	<u></u>
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	- >//.
Signature of a member or :	an authorized representative of a member
Signature of a member or : This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware t
This document is executed in accordance any false information submitted in a docur	with section 605.0203 (1) (b), Florida Statutes. I am aware t
This document is executed in accordance	with section 605.0203 (1) (b). Florida Statutes, I am aware the to the Department of State constitutes a third degree fellowers.

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)