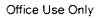
| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: |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





900334685559

19 SEP 20 Fit 2: 02

SEP 23 2019 Brumpley



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301

P: 866.625.0838 F: 866.625.0839

COGENCYGLOBAL.COM

Account#: 120000000088

| Date: | 09/20/2019 | |
|------------|-------------------------------------|-----------|
| Name: | Joy Weaver | <u> </u> |
| | #:1132351 | _ |
| | ne: FAT | CALF, LLC |
| | cles of Incorporation/Authorization | |
| ☐ Am | endment | |
| ☐ Cha | ange of Agent | |
| ☐ Rei | nstatement | |
| ✓ Cor | nversion | |
| ☐ Mei | rger | |
| Dis | solution/Withdrawal | |
| ☐ Fict | titious Name | |
| Oth | er | |
| | | |
| Authorized | d Amount: \$150.00 | |
| Signature: | July | |

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: Castlerock Investments, Inc. (P97000069250) |
|--|
| (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) |
| August 6, 1997 |
| on |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| Fat Calf, LLC |
| (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 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.

| Signed this Aday of September | 20_19 |
|---|--|
| Signature of Authorized Representative of Limi | ited Liability Company: |
| Signature of Authorized Representative: | Title: Manager |
| Signature(s) on behalf of Other Business Entity: | [See below for required signature(s)] |
| Signature: | |
| Printed Name: Curtis R. Ford | Title: President |
| Signature: | |
| Signature: Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| If Florida Corporation: | |
| Signature of Chairman, Vice Chairman, Director, or | Officer. |
| If Directors or Officers have not been selected, an In | |
| If Florida General Partnership or Limited Liabili | ty Partnership: |
| Signature of one General Partner. | • |
| If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. | ty Limited Partnership: |
| All others: Signature of an authorized person. | |
| <u>Fees:</u> | |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Fat Calf, LLC | | <u></u> , <u></u> , | |
|---|--|--|--|
| (Must | contain the words "Limited Lia | bility Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - Add | ress: | | |
| | | principal office of the Limited Liability Company is | |
| Principal Office Address: | | Mailing Address: | |
| interpar office / to | 101 035 | | |
| 542 Beach Avenue | | 542 Beach Avenue | |
| | | | |
| Atlantic Beach, Florida | 32233 | Atlantic Beach, Florida 32233 | |
| ARTICLE III - Reg | gistered Agent, Registe | red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another | |
| ARTICLE III - Reg The Limited Liability Com business entity with an act The name and the Flo | gistered Agent, Registe | red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another | |
| ARTICLE III - Reg (The Limited Liability Combusiness entity with an act The name and the Flo | gistered Agent, Registe npany cannot serve as its own R tive Florida registration.) orida street address of t | red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another | |
| (The Limited Liability Combusiness entity with an act The name and the Flo | gistered Agent, Registe npany cannot serve as its own R tive Florida registration.) orida street address of t | red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are: | |
| ARTICLE III - Reg (The Limited Liability Combusiness entity with an act The name and the Flo | gistered Agent, Registered Agent, Registered Agent, Register and Registration.) orida street address of the Curtis R. Ford N 542 Beach Avenue | red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are: | |
| ARTICLE III - Reg The Limited Liability Combusiness entity with an act The name and the Flo | gistered Agent, Registered Agent, Registered Agent, Register and Registration.) orida street address of the Curtis R. Ford N 542 Beach Avenue | red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are: | |
| ARTICLE III - Reg (The Limited Liability Combusiness entity with an act The name and the Flo | gistered Agent, Register appropriate as its own Registration.) orida street address of the Curtis R. Ford Note that the property of the prop | red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are: ame P.O. Box NOT acceptable) | |

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

| <u>Title:</u> | Name and Address: |
|---|--|
| "AMBR" = Authorized Member | |
| "MGR" = Manager | |
| MGR | Curtis R. Ford |
| | 542 Beach Avenue |
| | Atlantic Beach, Florida 32233 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| (Use attachment if necessary) | |
| | |
| | |
| TICLE V: Other provisions, if any. | |
| | icles of Organization shall be: |
| tember 21, 2019 at 12:00 a.m | 10.00 OF OF GUALDOCION BRIDET DOT |
| eember 21, 2017 at 12.00 a.m | · |
| | |
| | |
| REQUIRED SIGNATURE: | |
| (1, 2) | 7 |
| with 155 | al |
| Signature of a member | or an authorized representative of a member |
| This document is executed in accordance | lance with section 605,0203 (1) (b), Florida Statutes, I am aware that |
| any false information submitted in a d | document to the Department of State constitutes a third degree felony |
| as provided for in s.817.155, F.S. | |
| | |

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)

Curtis R. Ford, as Authorized Representative