# 119000243498

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

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# **CT CORP**

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### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

11/1/2019

D	Acc#120160000072
	Acc#120160000072
Name:	KERNEY & ASSOCIATES, LLC
Document #:	
Order #:	12371205
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:	
Apostille/Notarial Certification:	Country of Destination:  Number of Certs:
Filing: 🗸	Certified:  Plain:  COGS:
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount: \$ 150.00

Thank you!

### **COVER LETTER**

	w Filing Se ision of Co	ection orporations			
SIDIRCT	. Kerney &	Associates, LLC			
SUBJECT	•	(Name of Res	ulting Florida Limite	ed Com	ipany)
					d fees are submitted to convert an "Othe ecordance with s. 605.1045, F.S.
Please retu	rn all corre	spondence concerning	g this matter to:		
Lee Fanyo					
		(Contact Person)			
Lewis Bess	Williams and	Weese, P.C.			
		(Firm/Company)			
1801 Califor	mia Street, S	uite 3400			
		(Address)			
Denver CO	80202				
	((	City, State and Zip Code)			
thooven@le	wisbess.com				
E-mail A	ddress: (to b	e used for future annual re	port notifications)		
For further	r informatio	on concerning this ma	ter, please call:		
Tina Hoove	n		_at (	861-2	
(Na	ime of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)
		or the following amou a bank located in the		rocess	sed by this office must be payable in US
\$150.00 (\$25 for Cor & \$125 for A of Organizat	version Articles	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New Filing Division o Clifton Bu	f Corporat	ions	New Fi Divisio P. O. B	ling S n of C ox 63	Corporations

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: Kerney & Associates, 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)
02/04/1993
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Kerney & Associates, 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.

SECRETARY OF STATE

Signed this 1st day of November	
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Scott Wulinsky	Title: CFO, Secretary, & Treasurer
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: Scott Wulinsky	Title: CFO. Secretary. & Treasurer
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 If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	t <u>v Partnership:</u>
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	tv Limited Partnership:
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)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Kerney & Associa	ites, LLC	Liability Company, "L.L.C.," or "LEC.")
	(Musi contain the words 15mmed	induity company. Without W. Title: 7
ARTICLE II -		
The mailing add	dress and street address of	the principal office of the Limited Liability Company is:
Principal Offic	ce Address:	Mailing Address:
1300 NW 65th Pla	ace	214 North Tryon Street, Suite 2425
Fort Lauderdale F	1. 33309	Charlotte NC 28202
The name and t	the Florida street address o	of the registered agent are:
The name and t	the Florida street address of CT Corporation System	Name
The name and t		Name
The name and t	CT Corporation System  1200 South Pine Island R	Name
The name and t	CT Corporation System  1200 South Pine Island R Florida street address	Name  oad s (P.O. Box <u>NOT</u> acceptable)
The name and t	CT Corporation System  1200 South Pine Island R  Florida street addres	Name

Rose Song, Assistant Secretary (CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager MSHC, Inc. AMBR \_\_\_\_ 214 North Tryon Street, Suite 2425 Charlotte NC 28202 (Use attachment if necessary) ARTICLE V: Other provisions, if any. REQUIRED SIGNATURE: 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.

Lee Fanyo

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)