(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO:	New Filing Se Division of C				
SHRI	IFCT, CAPE CA	ANAVERAL JV, LLC			
300	<u> </u>	(Name of Res	ulting Florida Limite	d Com	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this matter to:		
Jessica	a Ward				
		(Contact Person)			
EKS					
		(Firm/Company)			
516 D	elannoy Avenue				
		(Address)			
Cocoa	, Florida 32922				
	((City, State and Zip Code)			
lorip@	eksdevelopment.c	om			
E-1	nail Address: (to b	e used for future annual re	port notifications)		
For fu	ırther informati	on concerning this ma	tter, please call:		
Jessica	. Ward		_at (³²¹)	632-4	710
	(Name of Conta	act Person)	(Area Code)	(Day	time Telephone Number)
		for the following amou a bank located in the		ocess	sed by this office must be payable in US
(\$25 fo	50.00 Filing Fees or Conversion 5 for Articles anization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Band Certified Copy		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STRI	EET ADDRES	S:	MAILI	NG A	ADDRESS:
New	Filing Section		New Fil	-	
	ion of Corporat	ions			orporations
	n Building Executive Cent	er Circle	P. O. Bo Tallahas		27 FL 32314

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:

Cape Canaveral Joint Venture
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a General Partnership
(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)
April 7, 1989 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:
CAPE CANAVERAL JV, 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 151 day of Octobox	20_19
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Printed Name: Malcolm Kirschenbaum	The state of the s
Printed Name: Malcolm Kirschenbaum	Title: President, EKS, Inc.
Si di Coul Di Di Di	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: Malcolm Kirschenbaum	Title: President EKS Inc
Printed Name to acom Krischensum	Title: Trestuent, ER3, Inc.
Signature	
Signature:Printed Name:	Title
Timed Name.	1100.
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	0.00
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida Commel Donas and Paris and Paris de de Cart	And Donate and Alice
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnersnip:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty I imited Partnership
Signatures of ALL General Partners.	ty Enuited Latthership.
orginatures of Arme General Furthers.	
All others:	
Signature of an authorized person.	
6	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
comment or condition	warra (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CAPE CANAVE	RAL JV, LLC	
	(Must contain the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II -	- Address:	
The mailing ad	dress and street address	of the principal office of the Limited Liability Company is:
Principal Offi	ce Address:	Mailing Address:
514 D 1		
516 Delannoy Av	enue enue	516 Delannoy Avenue
516 Delannoy Av Cocoa, Florida 32 ARTICLE III	922	Cocoa, Florida 32922
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Re ity Company cannot serve as its of the an active Florida registration.)	
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Re ity Company cannot serve as its of the an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Re ity Company cannot serve as its o h an active Florida registration.) the Florida street address	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Re ity Company cannot serve as its o h an active Florida registration.) the Florida street address	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Re ity Company cannot serve as its o h an active Florida registration.) the Florida street address J. Cole Oliver	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III (The Limited Liabil business entity with	- Registered Agent, Re ity Company cannot serve as its o h an active Florida registration.) the Florida street address J. Cole Oliver	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are: Name Y BLVD., SUITE 500

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:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	EKS, Inc.
	516 Delannoy Avenue
	Cocoa, Florida 32922
	
(Use attachment if necessary) ICLE V: Other provisions, if any.	
DECLUBED CICNATURE	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
- An	
Signature of a member or This document is executed in accordance	
Signature of a member or This document is executed in accordance any false information submitted in a docu	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felon
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S. Malcolm Kirschenbaum, President, EKS	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felon

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)