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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: New Filing S Division of C					
SUBJECT: Mad Bea	•				
SUBJECT:	(Name of Re	sulting Florida Limit	ed Con	npany)	
		_		d fees are submitted to convert an "Oth ecordance with s. 605.1045, F.S.	ıcı
Please return all corr	espondence concernin	g this matter to:			
Jessica Martin, CPA					
	(Contact Person)				
CPA Partners, LLC					
	(Firm/Company)				
8200 - 113th Street, Suit	e 103				
	(Address)				
Seminole, FL 33772					
	City, State and Zip Code)				
jessica@epapartnersllc.e	•				
E-mail Address: (to b	e used for future annual re	port notifications)			
For firsther informati	on concerning this ma	ttar plaaca call:			
	on concerning this ma	·			
Jessica Martin, CPA		_at () <u> </u>	2080 Ext. 106 (time Telephone Number)	
(Name of Conta	ict Person)	(Area Code)	(Day	time Telephone Number)	
	or the following amou a bank located in the	· ·	rocess	sed by this office must be payable in U	S
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	
STREET ADDRES	S:	MAILI	NG A	ADDRESS:	
New Filing Section		New Fi			
Division of Corporat	ions			Corporations	
Clifton Building		P. O. Be	ox 63)	27	

Tallahassee. FL 32314

2661 Executive Center Circle 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.

Mad Beach Holdings. 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 PIS - 79980
(Enter state, or if a non-U.S. entity, the name of the country)
09/21/2018 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Mad Beach Holdings, 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 14th day of November	20_19
Signature of Authorized Representative of Limi	ted Lability Company:
Signature of Authorized Representative: Printed Name: Stephen Ross	Title: President
Signature(s) on behalf of Ather Business Entity:	See below for required signature(s)
Signature: Printed Name: Stephen Ross	
Signature:	Tisks, Procident
Printed Name: Stopacii Ross	Tige: Frestdent
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	l'itle:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Timed wane.	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida Community and I had I had I	And Donate and Line
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty rartnership:
Signature of one General Farmer.	
If Florida Limited Partnership or Limited Liabili	
Signatures of ALL General Partners.	
All others	
All others: Signature of an authorized person.	
orginature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•	pany is:
Mad Beach Holdings, LLC	
(Must contain the words "Limi	ted Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE H - Address:	
The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8200 - 113th Street, Suite 103	8200 - 113th Street, Suite 103
Seminole, FL 33772	Seminole, FL 33772
ARTICLE III - Registered Agent Re	egistered Office & Registered Agent's Signature:
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street addres	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another agent are:
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street addres CPA Partners, LLC	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street addres CPA Partners, LLC 8200 113th Street	Name ?
8200 113th Street	Name Z
8200 113th Street	Name 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7

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.

Denoit Theres, C.P.A.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

•

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Stephen Ross
	10905 Cherokee Drive
	Madiera Beach, FL 33708
	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
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(Use attachment if necessary) CLE V: Other provisions, if any.	
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CLE V: Other provisions, if any.	
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CLE V: Other provisions, if any.	
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member of	r an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	e with section 605.0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	e with section 605.0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any talse information submitted in a document as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am aware tha
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any talse information submitted in a document as provided for in s.817.155, F.S. Stephen Ross	r an authorized representative of a member re with section 605.0203 (1) (b), Florida Statutes. I am aware the ument to the Department of State constitutes a third degree felor typed or printed name of signee

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