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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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#### **CT CORP**

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

**Date:** \_\_\_\_\_12/01/2022

	Acc#I20160000072						
Name:	The Linx Apartments Tampa , LLC						
Document #:							
Order #:	14657265						
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:							
Certified Copy of							
Apostille/Notarial Certification:	Country of Destination:  Number of Certs:						
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Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount: \$ 55.00						

Thank you!

#### COVER LETTER

	O: Registration Section Division of Corporations							
SHRIEC	The Linx	Apartments Tampa, LLC						
30000	, I +	Name of Florida	Limited Liability Com	ршу				
	Jability Co	s of Conversion and fo mpany" into an "Othe						
Please ret	turn all corr	espondence concernin	g this matter to:					
Jeffrey C.	Shannon, Esq	uire						
		Contact Person	· · · · · · · · · · · · · · · · · · ·					
Jeffrey C.	Shannon P.A.							
		Firm/Company						
2025 E 7th	i Ave.							
	<u> </u>	Address						
Tampa, FI	,33602							
	(	ity, State and Zip Code						
oedwards6	@jeshannonpa	com						
_	•	be used for future annual	report notification)					
For furth	er informati	ion concerning this ma	itter, please call:					
Jeffrey C.	Shannon P.A.		at ( <u></u>	906-6450				
Name	e of Contact P	erson	Area Code and	Daytime Telephone Number				
Enclosed	l is a check	for the following amor	unt:					
\$25.00	Filing Fee	S30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	S60,00 Filing Fee, Certified Copy, and Certificate of Status				
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314					
CR2E106	(07/14)							

### FILED

## Articles of Conversion For Florida Limited Liability Company Into

"Converted or Other Business Entity"

TAL

2022 DEC - 1 AM 10: 26 SECRETARY LF STATE TALLAHASSEE, FL

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045. Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:
The Linx Apartments, LLC
Enter Name of Florida Limited Liability Company
2. The name of the "Converted or Other Business Entity" is:
The Linx Apartments Tampa, LLC
Enter Name of "Converted or Other Business Entity"
3. The "Converted or Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
organized, formed or incorporated under the laws of
(Date of organization, formation or incorporation)
and the formation document is attached (if applicable).
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.
5. This conversion shall be effective in Florida on:  [The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State: AND 2) must be the same as the effective date of the conversion under the laws governing the "Other Business Entity.")

Page 1 of 2

- 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
  - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address:		Jeffrey C. Sl	Jeffrey C. Shannon P.A.					
		2025 E 7th 2	Ve.,	_				
Mailin	g Address:	Tampa, Flor	Tampa, Florida 33605					
app and	raisal rights 605,1061-6	the amount to 05.1072, F.S.	whic	Entity" has agreed to pay h such members are entit	led under ss. 605,1006			
Signed	this1	st da	y of_	December	. 20 22			
Signati	ure:		signed	by a Member or Authorized	Representative			
Printed	l Name: Rac	dwan Nassri		Title: Authorized Re	epresentative			
Fees:	Filing Fee: Certified C Certificate	• •	S	525.00 530.00 (Optional) 55.00 (Optional)				

Page 2 of 2