# L200 0000 6908

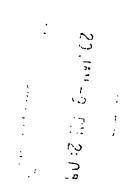
(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
(Only/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Falling Offices.

Office Use Only



900336716049

11/19/19--U1012--U06 \*\*185.00



D O'KEEFE JAN 1 0 2020

W19-110077



December 19, 2019

CINDY BEEMER BEEMER PROPERTIES 151 WOODCLIFF ROAD SPRINGDALE, AR 72764

SUBJECT: BEEMER PROPERTIES LLC

Ref. Number: W19000110077

We have received your document for BEEMER PROPERTIES LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 419A00025858

DANIEL L O'KEEFE Regulatory Specialist II

www.sunbiz.org

Danie/

#### **COVER LETTER**

O: New Filing Section Division of Corporations	
UBJECT: Beener Properties LLC (Name of Resulting Florida Limited Company)	
he enclosed Articles of Conversion. Articles of Organization, and fees are submitted to convert an "Oth-usiness Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.	er
lease return all correspondence concerning this matter to:	
Cindy Beemer Michael Cypt (Contact Person)	
Beener Properties (Firm/Company)	
151 Wood Cliff RoAd	
SDRING date, AR 72764 (City. State and Zip Code)	
E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (479) 466-6630 (Daytime Telephone Number)	
Enclosed is a check for the following amount: (All checks processed by this office must be payable in U dollars and drawn on a bank located in the United States)	S
S150.00 Filing Fees S155.00 Filing Fees and Certificate of S125 for Articles Status  S150.00 Filing Fees S185.00 Filing Fees and Certified Copy and Certificate of Status  S180.00 Filing Fees Certified Copy and Certificate of Status	
STREET ADDRESS: MAILING ADDRESS:	

#### STREET ADDRESS:

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

#### Articles of Conversion

For

## "Other Business Entity" Into

#### Florida Limited Liability Company

e Articles of Conversion and attached Articles of Organization are submitted to convert the following Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045. Florida itutes.

The name of the "Other Business Entity" immediately prior to the filing of the Article  BEEMER PROPERTIES LLC  (Enter Name of Other Business Entity)	es of Conversion is:
The "Other Business Entity" is a Limited Limity Compa (Enter entity type. Example: corporation, limited partnership, general partnership, common	NU n law or business trust, etc.)
st organized, formed or incorporated under the laws ofARKANSAS	
October 7, 2002.  (date of organization, formation or incorporation)	
The name of the Florida Limited Liability Company as set forth in the attached Artic	cles of Organization:
Beemer Properties LLC (Enter Name of Plorida Limited Liability Company)	
If not effective on the date of filing, enter the effective date:  ne effective date: Cannot be prior to date of receipt or filed date nor more than 9 date this document is filed by the Florida Department of State.)  E: If the date inserted in this block does not meet the applicable statutory filing requirements, this date insert's effective date on the Department of State's records.	
The plan of conversion has been approved in accordance with all applicable statutes.	
The "Converted or Other Business Entity" has agreed to pay any members having apprais which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.	sal rights the amount to
	29 (1811 - 2) 61

\$5.00 (Optional)

Certificate of Status:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
151 Wood eliff Rund New Emyana Beach FL Springdale, AR 72760 32169	<u> </u> -†-
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or mother business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:    C   N   S   P   N   N   T   T   T   T   T   T   T   T	
++05 Sea Mist DRIVE #115	
Florida street address (P.O. Box <u>NOT</u> acceptable)	
NEW SMYRNA BOACK FL 32169 City State Zip	
twing been named as registered agent and to accept service of process for the above stated limited liability company at accept designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity, ther agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, a familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S	I
Registered Agent's Signature (REQUIRED)	
(CONTINUED)	

٨	RTI	. H.	TV-

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

<u>l'itle:</u>	Name and Address:
AMBR" = Authorized Member MGR" = Manager	ar de Comman
MGR	CINDY S. BREMER
	SPRINGENIE, AR 7276
nmaR	Michael Cudit
TT-11-DIC	ISI Wood Cliff ROAD
	Springdalt, AR 72764
Use attachment if necessary)	
Use attachment if necessary)  Æ V: Other provisions, if any.	
	·
EV: Other provisions, if any.	
REQUIRED SIGNATURE:	A authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance.	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes, I am aware t
REQUIRED SIGNATURE:  Signature of a member of any false information submitted in a doct	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes, I am aware to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance any false 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 to ment to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance any false 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 t