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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer.	[
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Office Use Only



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SHAW LAW FIRM

Attorneys & Counselors at Law

Duane M. Shaw Christopher F. Brislin * J. Logan Cannon Ploomer E. "Ward" Cochran II Post Office Drawer 36250 1169 Ebenezer Road Rock Hill, South Carolina 29732 www.ShawLawFirm.net Telephone: 803-329-4200 Facsimile: 803-329-4202

* Also Licensed in North Carolina

February 28, 2020

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

RE: TDR Holdings, LLC

Dear Sir/Madam:

Please find enclosed Articles of Conversion, Articles of Organization and Certificate of Existence along with the filing fee check in the amount of \$150.00 in regards to the above mentioned Entity.

If you have any questions, please do not hesitate to call.

Sincerely,

Dena H. Oates

Real Estate Paralegal

enatt. octes

Enclosures -

COVER LETTER

TO:	New Filing S Division of C						
SHRJ	FCT: TDR HO	LDINGS, LLC, A FLORI	DA LIMITED LI	ABILITY	COMPANY		
300	Le 1	(Name of Res	sulting Florida Li	mited Cor	mpany)		
			•		nd fees are submitted to convert coordance with s. 605.1045, F.		ther
Please	return all corr	espondence concernin	g this matter to) :			
CHRIS	STOPHER F. BR	ISLIN					
		(Contact Person)					
SHAW	LAW FIRM						
		(Firm/Company)					
1169 E	BENEZER ROA	AD					
		(Address)					
ROCK	HILL, SC 29732	2					
	((City, State and Zip Code)					
CBRIS	LIN@SHAWLA	WFIRM.NET		_			
E-n	nail Address: (to b	e used for future annual re	port notifications)			
For fu	rther informati	on concerning this ma	tter, please cal	1 :			
CHRIS	STOPHER F. BR	ISLIN	at (⁸⁰³	329-	4200		
	(Name of Conta	ct Person)		de) (Day	vtime Telephone Number)		
		or the following amou a bank located in the	•	•	sed by this office must be paya	ble in U	JS
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles nization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Fili and Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
	Mailing Addi New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810	20 MAR -2 7M	LYSION OF CORP.

Tallahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The 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 Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: TDR HOLDINGS, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY (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
(Enter state, or if a non-U.S. entity, the name of the country)
02/05/2015
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
TDR 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 23rd	_ day of FEBRUARY	20_20	
		of Limited Liability Company:	
Signature of Authoriz Printed Name: KEN Sh	zed Representative:	Title: MANAGER	
Signature(s) on beha	lf of Other Business E	Cntity: [See below for required sign	ature(s)]
Signature: Printed Name: KEN Sh	IARP	Title: MANAGER	
Signature:			
Printed Name:		Title:	
Signature:		Title:	
	·		
Printed Name:		Title:	
Signature:			
Printed Name:	 _	Title:	_
Signature:			
Printed Name:		Title:	
	, Vice Chairman, Direc	ctor, or Officer. d, an Incorporator must sign.	
If Florida General Pa Signature of one Gener		Liability Partnership:	
<u>If Florida Limited Pa</u> Signatures of <u>ALL</u> Ger		Liability Limited Partnership:	
All others: Signature of an authori	zed person.		
Fees:			
Articles of Cor	nversion:	\$25.00	

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Na The name of the I	me: Limited Liability Compar	ny is:	
TDR HOLDINGS, L			
(M	ust contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A		he principal office of the Limited I	Liability Company is:
Principal Office	Address:	Mailing Address:	
771 Chesapeake D	rive	771 Chesapeake Drive	
Tarpon Springs, FL		Tarpon Springs, FL 34689	
	logistared Agent Degist	and Office & Designand Agent	'a Cionatura:
ARTICLE III - R	legistered Agent, Regist	ered Office, & Registered Agent	's Signature:
	ompany cannot serve as its own in active Florida registration.)	Registered Agent. You must designate an indi	victual or another
The name and the	Florida street address of	the registered agent are:	
	KEN SHARP		
	N	lame	
	771 Chesapeake Drive		
	Florida street address (P.O. Box NOT acceptable)	
	Tarpon Springs	FL 34689	
	City	Zip	
liability comp registered agent statutes relating	any at the place designate and agree to act in this ca g to the proper and compl	nd to accept service of process for the ed in this certificate, I hereby accept spacity. I further agree to comply w ete performance of my duties, and I as registered agent as provided for in	t the appointment as rith the provisions of all am familiar with and
			N. W

(CONTINUED)

Registered Agent's Signature (REQUIRED)

30 KKB | 3 WK | - 03

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	KEN SHARP	
	771 Chesapeake Drive	
	Tarpon Springs, FL 34689	
-		
(Use attachment if necessary)		
LE V: Other provisions, if any.		
		
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE.	/	
	^	

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)

KEN SHARP, MANAGER



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

TDR HOLDINGS, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 5th day of February, 2015

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 6th day of November, 2019.

6 laine I Marshall

Secretary of State

Certification# 105790972-1 Reference# 15666427- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification