

L200000087973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

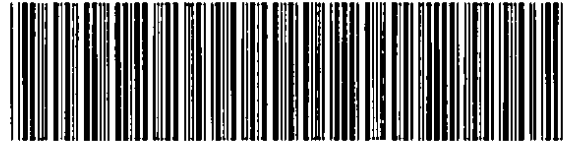
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

K PAGE

MAR 25 2020



400338265754

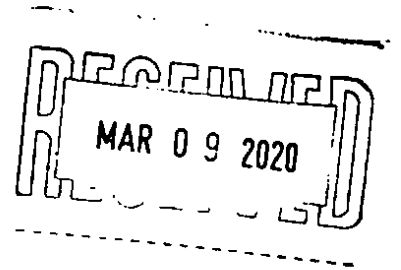
12/20/19--01007--003 \*\*105.00

12/20/19 12:15 PM  
20191220 12:15 PM

FILED  
2020 MAR 23 PM 7:14  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations



February 26, 2020

STEPHEN MCNEIL  
145 HOBSONS LAKE DRIVE, STE 400  
HALIFAX, NS B3S0H-9

SUBJECT: LOFTON ISLAND HOLDINGS LP  
Ref. Number: W20000005139

We have received your document for LOFTON ISLAND HOLDINGS LP and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Keyna E Page  
Regulatory Specialist II

Letter Number: 320A00004200

2020 MAR 23 PM 2:02



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 23, 2020

STEPHEN MCNEIL  
145 HOBSON'S LAKE DRIVE, STE 400  
HALIFAX, NS B3S0H-9

SUBJECT: LOFTON ISLAND HOLDINGS LP  
Ref. Number: W20000005139

We have received your document for LOFTON ISLAND HOLDINGS LP and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU HAVE SUBMITTED THE WRONG FORMS. PLEASE FILL OUT THE ATTACHED FORM AND MAIL IT BACK AS SOON AS POSSIBLE.

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.

Keyna E Page  
Regulatory Specialist II

Letter Number: 420A00001615

RECEIVED  
2020 FEB 21 PM 1:26



March 11, 2020

**Keyna Page**  
New Filing Section  
DIVISION OF CORPORATIONS  
P.O. Box 6327  
Tallahassee, Florida 32314

**VIA MAIL**

Dear Ms. Page,

**RE:   Lofton Island Holdings LP**  
**Ref. Number: W20000005139**

Thank you for your letter dated February 26, 2020, which bears Letter Number 320A00004200.

As requested in your letter, we have filed the Annual Returns for Lofton Island Holdings LP. Please find enclosed a copy of the 2020 Annual Returns.

As requested, please also find enclosed your letter dated February 26, 2020, and the Article of Conversion and Article of Organization that were enclosed in your letter.

I hope the documents are now in order and that the Articles of Conversion may be accepted for filing. If you require any additional information or documents in relation to this filing, please contact me at 902-423-4000 ext. 241 or by email at [mencils@armcocap.com](mailto:mencils@armcocap.com). I can arrange delivery of any additional documents needed to complete the conversion.

Yours truly,  
**ARMCO CAPITAL INC.**

A handwritten signature in black ink, appearing to read "Stephen McNeil", written over a horizontal line.

Stephen McNeil  
Legal Counsel

Encl.

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:

**Lofton Island Holdings LP**

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited partnership AIC-ESL  
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Florida  
(Enter state, or if a non-U.S. entity, the name of the country)

on December 23, 2010  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

**Lofton Island Holdings LLC**

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: December 31, 2019.  
(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.

**FILED**  
2010 MAR 23 PM 7:14  
SCOTT COUNTY CLERK  
TALLAHASSEE, FL

Signed this 14<sup>th</sup> day of February 2020.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: [Signature]

Printed Name: David Shahinian Title: Manager

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: [Signature]

Printed Name: David Shahinian Title: Manager

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**All others:**

Signature of an authorized person.

**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)

**FILED**  
MAR 23 PM 7:14  
SECRETARY OF STATE  
TALLAHASSEE, FL

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

**Lofton Island Holdings 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:

**3040 Oasis Grand Blvd**  
**3rd Floor, Management Office**  
**Fort Myers, Florida 33916**

### Mailing Address:

**3040 Oasis Grand Blvd**  
**3rd Floor, Management Office**  
**Fort Myers, Florida 33916**

## 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 another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

**Amber Lynn Coleman, Esq.**

Name

**424 Luna Bella Lane, Suite 122**

Florida street address (P.O. Box **NOT** acceptable)

**New Smyrna Beach**      **FL**      **32168**

City

Zip

*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)

**FILED**  
MAR 23 PM 7:14  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**MGR**

**MGR**

**MGR**

**Name and Address:**

**George Armoyan**

**145 Hobsons Lake Drive, Suite 400**

**Halifax, Nova Scotia, Canada, B3S 0H9**

**David Shahinian**

**424 Luna Bella Lane, Suite 122**

**New Smyrna Beach, Florida, 32168-4685**

**Martin Pham**

**424 Luna Bella Lane, Suite 122**

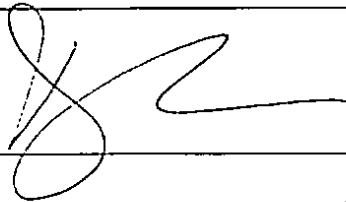
**New Smyrna Beach, Florida, 32168-4685**

(Use attachment if necessary)

**ARTICLE V: Other provisions, if any.**

**Unless otherwise limited by the Limited Liability Company Agreement, the limited liability company shall have the authority to engage in any lawful business.**

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

*David Shahinian*

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)**

RECEIVED  
MAR 23 PM 7:14  
TALLAHASSEE, FL

FILED