

L200000125067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

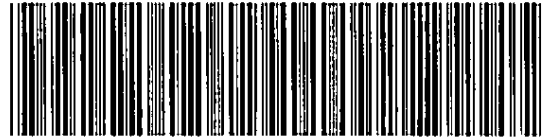
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700343416627

04/17/20--01015--030 **185.00

FILED

2020 MAY 11 AM 7:20

SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 22, 2020

AVI NIR
1501 NW 12 TH AVE
POMPANO BEACH, FL 33069

SUBJECT: U.S. TROPICALS, LLC
Ref. Number: W20000039723

We have received your document for U.S. TROPICALS, 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):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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

11:30a Start

Letter Number: 320A00008386

4/29/20^u 3:45p CATE
5/5/20^{Tu} 12:50p Avi signed pv.

2020 MAY 11 PM 1:47
RECEIVED
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: U.S. Tropicals, LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Avi Nir

(Contact Person)

U.S. Tropicals, LLC

(Firm/Company)

1501 NW 12 Th Ave

(Address)

Pompano Beach, FL - 33069

(City, State and Zip Code)

legal@aycofarms.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Avi Nir

954

788-6800

at (_____) _____

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☐ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☒ \$185.00 Filing Fees,
Certified Copy, and
Certificate of Status

Mailing Address:

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

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
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:
U.S. TROPICALS, INC.

(Enter Name of Other Business Entity)
corporation

2. The "Other Business Entity" is a (PIO-5255)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Florida

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

04/12/2010
on _____
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
U.S. TROPICALS, LLC

(Enter Name of Florida Limited Liability Company)
05/01/2020

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.

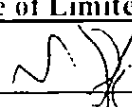
5. The plan of conversion has been approved in accordance with all applicable statutes.

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.

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SECRETARY OF STATE
TALLAHASSEE, FL

Signed this 10th day of March 20 20

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: 

Printed Name: Avi Nir Title: President

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

X Signature: 
Printed Name: AVI NIR Title: President

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)

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SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

U.S. TROPICALS, 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:

1501 NW 12th Ave.
Pompano Beach, FL - 33069

Mailing Address:

1501 NW 12th Ave.
Pompano Beach, FL - 33069

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:

Lance Shinder - Black Srebnick Kornspan & Stumpf, PA

Name

One Town Center Road, Suite 201

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

Boca Raton

33486

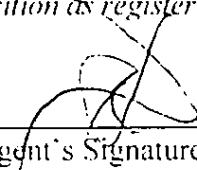
FL

City

Zip

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TALLAHASSEE, FL

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)

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

Name and Address:

Ben Nir

1501 NW 12th Ave

Pompano Beach, FL - 33069

(Use attachment if necessary)

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TALLAHASSEE, FL

ARTICLE V: Other provisions, if any.

100% ownership shares being transfered to Ben Nir.

Attacehed will be Articles of Amendment-Form No.: CR2E011 (1/20)

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.

Avi Nir

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)