L2000/61219

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(B	usiness Entity Name)
(D	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only

JOCA 1,7 2020

T. SCOTT



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2020 JUH -8 PM 2: 45

Articles of Conversion For

10

"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 Ar Siesta Pebble Inc — (Enter Name of Other Business Entity)	ticles of Conversion is:
composition	
2. The "Other Business Entity" is a	nmon law or business trust, etc.)
Florida	
First organized, formed or incorporated under the laws of	the name of the country)
April 6, 2012	
on (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached A Siesta Pebble, LLC	articles of Organization:
(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 that 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 document's effective date on the Department of State's records.	
5. The plan of conversion has been approved in accordance with all applicable statute	es.
6. The "Converted or Other Business Entity" has agreed to pay any members having app which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	
	2020
	FILED DECEMBER OF THE PROPERTY
	- B E
	72.

Signed this 1st day of June	20
Signature of Authorized Representative of Lim	
Signature of Authorized Representative: Lucus Printed Name: Michelle L. Graham	201000000
Printed Name: Michelle L. Graham	Title: Manager
Printed Name: Michelle C. Granam	1 Me. Manager
Signature(s) on behalf of Other Business Entity:	
Signature: Would V. Jalon	
Printed Name: Michelle L. Graham	Title: President and Director
I fillited (Valific)	
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	Tid
Printed Name:	rue:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	
If Directory of Officers have not been hereover, an in-	and the second s
If Florida General Partnership or Limited Liabili	ity Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
<u> </u>	
All others:	
Signature of an authorized person.	
Fees:	
	22.5.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	pany is:
,,	•
Siesta Pebble, LLC	
(Must contain the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of	of the principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
1126 SE 12th Court	1126 SE 12th Court
Cape Coral, Florida 33990	Cape Coral, Florida 33990
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
The name and the Florida street address	of the registered agent are:
Michelle L. Graham	
	Name Name P. C. D. W. MOT
1126 SE 12th Court	
Florida street addre	ess (P.O. Box NOT acceptable) FL 33990 FL 33990
Cape Coral	FL 33990
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)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Michelle L. Graham
	1126 SE 12th Court
	Cape Coral, Florida 33990
MGR	Kimberly A. Arnold
	1126 SE 12th Court
	Cape Coral, Florida 33990
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
LE V: Other provisions, if any.	
CLE V: Other provisions, if any.	War
REQUIRED SIGNATURE:	W. W.
REQUIRED SIGNATURE: Signature of a member of	r an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	e with section 605,0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	e with section 605,0203 (1) (b), Florida Statutes, I am aware the
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S. Michelle L. Graham	ee with section 605.0203 (1) (b), Florida Statutes. I am aware the ument to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S. Michelle L. Graham	yped or printed name of signee
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S. Michelle L. Graham	ee with section 605.0203 (1) (b), Florida Statutes. I am aware the ument to the Department of State constitutes a third degree felo