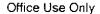
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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06/23/20--01002--025 **97.50

05/08/20--01011--017 **52.50

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COVER LETTER

TO:	New Filing S Division of C			*	
SHRI	ECT: COCON	UT GROVE AERIAL CIF	RCUS LLC.		
3000	LC1		sulting Florida Lim	ted Con	mpany)
			_		nd fees are submitted to convert an "Othe accordance with s. 605.1045, F.S.
Please	return all corr	espondence concernin	g this matter to:		
LAWR	ENCE D. WANS	SCHEK			
		(Contact Person)		-	
cocc	NUT GROVE A	ERIAL CIRCUS LLC.			
		(Firm/Company)		-	
14600	SW 18 CT				
		(Address)		-	
DAVIE	FL 33325				
	((City, State and Zip Code)	_	-	
CMDF	ROONTWORRY	@BELLSOUTH.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 call:		
LAWR	ENCE WANSCI	HEK	at (⁷⁸⁶)423-	7122
	(Name of Conta	act Person)) (Day	ytime Telephone Number)
		for the following amou a bank located in the		proces	sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C	ection		New	t Address: Filing Section ion of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

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, Flo Statutes.

	The name of the "Other Business DCONUT GROVE AERIAL CIRCUS I		ly prior to the filing of the Articles of Conversion i
	(Enter	Name of Other Busine	ess Entity)
2.	The "Other Business Entity" is a	CORPORATION	P12000023912
	(Enter entity type. Example:	corporation, limited p	artnership, general partnership, common law or business trus
Fi	rst organized, formed or incorpora	ted under the laws (of FLORIDA Of (Enter state, or if a non-U.S. entity, the name of the country)
		•	(Enter state, or if a non-U.S. entity, the name of the country)
on	MARCH 9, 2012 (date of organization, formation or inco		
-	(date of organization, formation or inco	rporation)	
3.	The name of the Florida Limited	Liability Company	as set forth in the attached Articles of Organizat
C	DCONUT GROVE AERIAL CIRCUS L	LC.	
	(Enter Name o	f Florida Limited Liabi	ility Company)
(T th <u>No</u>	e date this document is filed by t	or to date of receip the Florida Depart not meet the applicable	ot or filed date nor more than 90 calendar days a
5.	The plan of conversion has been a	pproved in accorda	ince with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amou which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed th	is <u>1st</u>	day of JUNE	20 <u></u>
		rized Representative of Lim	1 \
Signature Printed Na	of Authori	zed Representative: Zourt	Title: REGISTERED AGENT
Signature	(s) on beh	alf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Na	ame:LAWR	ENCE D WANSCHEK	Title: DIRECTOR
Signature:	: 		
Printed Na	ame:		Title:
Signature:	:		
Printed Na	ame:		Title:
Signature:	<u>.</u>		
Printed Na	ame:		Title:
Signature:	•		
Printed Na	ame:		Title:
Signature:	•		
Printed Na	ame:		Title:
Signature		ion: in, Vice Chairman, Director, or rs have not been selected, an Ir	
		<mark>Partnership or Limited Liabil</mark> eral Partner.	ity Partnership:
		Partnership or Limited Liabil eneral Partners.	ity Limited Partnership:
All others Signature		orized person.	
Fees:			
Fe	rticles of C	onversion: ida Articles of Organization:	\$25.00 \$125.00 \$30.00 (Ontinual)

Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

DAVIE

The name of the Limited Liability Company is	is:	
COCONUT GROVE AERIAL CIRCUS LLC. (Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street address of the		Company
Principal Office Address:	Mailing Address:	
14600 SW 18 CT. DAVIE, FL 33325	14600 SW 18 CT. DAVIE, FL 33325	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Repusiness entity with an active Florida registration.)	ed Office, & Registered Agent's Signa gistered Agent. You must designate an individual or a	ature: nother
The name and the Florida street address of the	e registered agent are:	201
LAWRENCE D. WANSCHE	: K	20 MAY
Na	me	ب ن
14600 SW 18 CT.		AT TO
Florida street address (P	.O. Box NOT acceptable)	5

Having been named as registered agent and to accept service of process for the above stated lin liability company at the place designated in this certificate, I hereby accept the appointment a registered agent and agree to act in this capacity. I further agree to comply with the provisions statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

33325

Zip

Registered Agent's Signature (REQUIRED)

City

(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	LAWRENCE D. WANSCHEK
	14600 SW 18 CT
	DAVIE, FL 33325
(III	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	f:
Laurence D. Wans	
Laurence Whans	che K

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.

LAWRENCE D. WANSCHEK

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)