# L20000186445

(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



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# **COVER LETTER**

<b>TO:</b> New Filing S Division of C					
	of the Sea Limited Liab	ility C	ompany		
SUBJECT:			; Florida Limito	ed Con	npany)
			_		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this	s matter to:		
Lauren Thornton					
	(Contact Person)				
	(Firm/Company)				
3225 McLeod Drive, S	uite 100				
	(Address)				
Las Vegas, Nevada 89	9121				
(1	City, State and Zip Code)				
Ithornton@andersonad	dvisors.com				
E-mail Address: (to b	e used for future annual re	port n	otifications)		
For further informati	on concerning this ma	tter, j	please call:		
Lauren Thornton		at (	,702	871-8	8535
(Name of Conta	ict Person)	— `		(Day	rtime Telephone Number)
	for the following amount a bank located in the		-	rocess	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Copy		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add			_		Address:
New Filing S Division of C					Filing Section ion of Corporations
P.O. Box 632	-				Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# **Articles of Conversion**

For

# "Other Business Entity"

Into

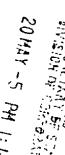
# Florida Limited Liability Company

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, Florid Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Thinking of the Sea Limited Liability Company
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company MLY 0000 229 ( (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, or
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, or
First organized, formed or incorporated under the laws of
First organized, formed or incorporated under the laws of
7/8/2013
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
Thinking of the Sea Limited Liability Company
(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.)
<u>Note:</u> 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 3rd day of June	_ 20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Found Manager Lauren Thornton	Title: Authorized Representative
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)]
Signature: Lawren Thorston	Tisto, Authorized Penresentative
Printed Name: Lauren Thornton	Titte: Authorized Representative
Signature:Printed Name:	Title:
Signature:	m: I
Printed Name:	Title:
Signature:	77'.1
Printed Name:	11116:
Signature:	Title
Printed Name:	
Signature:	and the same of th
Printed Name:	little:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

(Must contain the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address	of the principal office of the Limited Lia	bility Company i
Principal Office Address:	Mailing Address:	
233 Rock Rd #316	233 Rock Rd #316	
Glen Rock, NJ 07542	Glen Rock, NJ 07542	
United States	United States	
(The Limited Liability Company cannot serve as its	gistered Office, & Registered Agent's own Registered Agent. You must designate an individ	
	own Registered Agent. You must designate an individ	ual or another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	own Registered Agent. You must designate an individe of the registered agent are:	ual or another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	own Registered Agent. You must designate an individe of the registered agent are:	ual or another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	own Registered Agent. You must designate an individe of the registered agent are:  Agents, Inc.  Name	ual or another  20 Harry - S PH
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address  Anderson Registered  12001 Research Park	own Registered Agent. You must designate an individe of the registered agent are:  Agents, Inc.  Name	ual or another  20 Harry - S PH
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address  Anderson Registered  12001 Research Park	own Registered Agent. You must designate an individes of the registered agent are:  Agents, Inc.  Name  kway, Suite 236-K	ual or another

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 a 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	
AMBR	Chestnut Investing, LLC
	1718 Capitol Ave.
	Cheyenne, WY 82001, US
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
•	
	<u> </u>
REQUIRED SIGNATURE:	
THE VOITED STORMED ON THE	Lauren Showton
(	NUMER MOTHIS

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.

Lauren Thornton

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)