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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

TO: New Filing So Division of C				
SUBJECT: BBQK, L	LC			
		ulting Florida Limi	ted Company	·/)
		•		es are submitted to convert an "Othe dance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
Kenneth B. Kirkpatrick				
	(Contact Person)		-	
Heritage Management	Corp.			
	(Firm/Company)		-	
2605 SW 33rd St Bldg	200			
	(Address)		-	
Ocala, FL 34471				
	City, State and Zip Code)		-	
ken@heritagemanage	ment.net			
E-mail Address: (to b	e used for future annual re	port notifications)	-	
For further information	on concerning this ma	tter, please call:		
Paul Ayoub		_at (³⁵²	620-2514	X = 222
(Name of Conta	et Person)	(Area Code	(Daytime	Telephone Number)
	or the following amou a bank located in the		processed t	by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop	ту Се	\$185.00 Filing Fees, rtified Copy, and rtificate of Status
Mailing Add	ress:		Street Ad	dress:
New Filing S	ection		New Filin	g Section
Division of C	•			of Corporations
P.O. Box 632	. /		The Centi	e 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 <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Flo Statutes.

BBQK, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a [S-Corporation Center entity type. Example: corporation, limited partnership, general partnership, common law or business true.
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 01/24/2002 (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizat
BBQK, LLC
(Enter Name of Florida Limited Liability Company)
(Exter Name of Fortial Entitled Elability 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: 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 document's effective date on the Department of State's records.
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: 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

Signed this <u>4th </u>	_ day of June	20
	ized Representative of Lim	
Clamatura of Authoriz	ted Representative:	
Signature of Authoriz Printed Name: Kenneth	B Kirkpatrick	Title: Manager
Printed Name: Neilleif	I B. KIIKPAUICK	[[[[Malkage]
Signature(s) on beha	If of Other Business Entity:	[See below for required signature(s)]
Signature: <u>25</u>		
Printed Name: Sandra	K. Kirkpatrick	Title: President
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
٠.		
Signature:		77° I
Printed Name:	· <u> </u> ·	Title:
C'		
Signature:		TPM
Printed Name:		Title:
If Florida Corporatio	\n.	
	on. 1, Vice Chairman, Director, or	Officer
	s have not been selected, an In	
ii Directors of Officer	s have not been selected; an in	corporator intist sign.
If Florida General Pa	artnership or Limited Liabili	ty Partnershin:
Signature of one Gene		<u> </u>
If Florida Limited Pa	artnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> Ge	neral Partners.	-
All others:		
Signature of an author	ized person.	
_		
Fees:		
Articles of Co		\$25.00
	da Articles of Organization:	\$125.00
Certified Cop		\$30.00 (Optional)
Certificate of	Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAN

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II -			915 - 6
The mailing add	dress and street address	of the principal office of the Limited Liabi	ility Company
Principal Offic	e Address:	Mailing Address:	
2505 SW 33rd St	t .	PO Box 2495	
Bldg 200		Ocala, FL 34478	
Ocala, FL 34471			
•	an active Florida registration.) he Florida street addres	s of the registered agent are:	6)
	Kenneth B. Kirkpatrio	ck	A:# 0.
	Kenneth B. Kirkpatrio	Name	8 - hii- 0
	Kenneth B. Kirkpatrio	Name	20 <u>my</u> 8 Fb
	2605 SW 33rd St Blo	Name	
	2605 SW 33rd St Blo	Name dg 200 ress (P.O. Box <u>NOT</u> acceptable)	
	2605 SW 33rd St Blo Florida street addi	Name ig 200 ress (P.O. Box <u>NOT</u> acceptable) FL ³⁴⁴⁷¹	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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	Sandra K. Kirkpatrick
	2605 SW 33rd St Bldg 200
	Ocala, FL 34471
NOO	Managah B. Widenskiele
MGR	Kenneth B. Kirkpatrick
	2605 SW 33rd St Bldg 200
	Ocala, FL 34471
	· · · · · · · · · · · · · · · · · · ·
	<u></u>
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURÉ:	
	the state of the s
Mh An	MITTA

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.

Kenneth B. Kirkpatrick

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)