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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Dc	ocument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

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F. SCOTT



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2020 SEP 23 AM 8: 5

COVER LETTER

TO:	New Filing S Division of C					
SUR	JECT: PFT Ver	ntures, LLC				
5000	,Ee1	(Name of Re	sulting Florida Limi	ted Cor	прапу)	
			•		nd fees are submitted to convert an "Cocordance with s. 605.1045, F.S.)the
Please	e return all corr	espondence concernin	g this matter to:			
Melar	nie E. Cuddyre, E	Esq.				
		(Contact Person)		-		
Leech	n Tishman Fusca	ildo & Lampl. LLC				
		(Firm/Company)		-		
525 V	Villiam Penn Plac	ce, Fl 28				
		(Address)		-		
Dittch	urah DA 15210	,				
-11130	urgh, PA 15219	C'4 . C. 4 . 17'. C. 1		-		
	•	City, State and Zip Code)				
	dyre@leechtishn			_		
B-r	mail Address: (to b	e used for future annual re	port notifications)			
For fi	urther informati	on concerning this ma	tter, please call:			
Melar	nie E. Cuddyre		at (412	\261-	1600	
	(Name of Conta	act Person)	(Area Code) (Day	1600 ytime Telephone Number)	
		for the following amou a bank located in the		rocess	sed by this office must be payable in	US
(\$25 fc & \$125	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C	ection orporations		New I Divis	t Address: Filing Section ion of Corporations 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 <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, Florida Statutes.

PFT Ventures, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
April 9, 2014 on
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:
PFT Ventures, LLC
(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.)
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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Signed this 28th day of August	20_20
/ Signature of Authorized Representative of Lim	
XV	11/1/1
Signature of Authorized Representative: Printed Name: John P. Perini	1/1/2
Printed Name: John P. Perini	Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
	•
Signature: Printed Name: John P. Perini	
Printed Name: John P. Perini	Title: Manager
Signature:	
Printed Name:	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	92.1
Printed Name:	Title:
Signature:	
Printed Name:	
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In	
	,
If Florida General Partnership or Limited Liabili	<u>ty Partnership:</u>
Signature of one General Partner.	
If Flavida Limitad Dautnauchin au Limitad Liabili	to Limited Dortnerskin.
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Farthership:
organization of the property o	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	me.		
	Limited Liability Company i	s:	
PFT Ventures, LLC			
(N	lust contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - A			
The mailing addre	ess and street address of the	principal office of the Limi	ted Liability Company is:
Principal Office	Address:	Mailing Address:	
4444 El Mar Dr. #4	06	4444 El Mar Dr. #406	
Lauderdale by the		Lauderdale by the Sea, F	-L 33308
ARTICLE III - I	Registered Agent, Register	red Office. & Registered A	gent's Signature:
(The Limited Liability (Company cannot serve as its own Reginactive Florida registration.)		
The name and the	Florida street address of the	e registered agent are:	
	John P. Perini		
	Nai	me	
	4444 El Mar Dr. #406		
	Florida street address (P.	O. Box NOT acceptable)	
	Lauderdale by the Sea	FL ³³³⁰⁸	
	City	Zip	
liability com registered agent statutes relatir	pany at the place designated t and agree to act in this cap ig to the proper and complet bligations of my position as t	in this certificate, I hereby a acity. I further agree to come performance of my duties, registered agent as provided	ply with the provisions of all and I am familiar with and
	Registered Agent's Si	gnature (REQUIRED)	2020 SEP 23

The name and address of each person authorized to manage and control the Limited Liability Company: Title: "AMBR" = Authorized Member

ARTICLE IV-

MGR = Manager MGR	John P. Perini
<u></u>	4444 El Mar Dr. #406
	Lauderdale by the Sea, FL 33308
	
	
(Use attachment if necessary)	
PLOT D I CO	
ΓICLE V: Other provisions, if any.	

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.

John P. Perini, Manager

Typed or printed name of signee

Filing Fees