L20000 324872

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	<u>-</u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	

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C RICO OCT 21 2020



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE: 463125 8148693
AUTHORIZATION: Sprelle Renan
COST LIMIT : \$ 185-00
ORDER DATE : October 21, 2020
ORDER TIME : 10:45 AM
ORDER NO. : 463125-005
CUSTOMER NO: 8148693
DOMESTIC FILING
NAME: BUNN PROPERTIES II, LLC
Maile: Both Profescion 11, Bile
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION / CONVERSION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY
PLAIN STAMPED COPY : XX CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Amanda Robinson - EXT. 62968
EXAMINER'S INITIALS:

COVER LETTER

то:	New Filing S Division of C						
CIID		•	ın Proj	perties II,	LLC		
SUB	JECT:	(Name of Re	sulting	Florida Lii	nited Co	ompany)	
Busii	ness Entity" into	o a "Florida Limited L	iabilit	y Compa	ny" in	and fees are submitted to convert accordance with s. 605.1045, F.	
Pleas	se return all con	respondence concernin	g uns	matter to);		
	Da	nna M. Fragakis, Esq.					
		(Contact Person)					
	Wood E	Buckel & Carmichael, PL	LC				
	·	(Firm/Company)		 -			
	2150 Gd	odlette Road N, Sixth F	oor				
		(Address)					
		Naples, FL 34104					
	(City, State and Zip Code)					
	C	dana@wbclawyers.com					
E-	mail Address: (to b	pe used for future annual re	port no	tifications)		
For f	urther informati	ion concerning this ma	tter, p	lease call	l;		
	Dana M. Frag	jakis, Esq.	at (239	,	552-4138	
	(Name of Conta	act Person)		(Area Coo	ie) (Da	aytime Telephone Number)	
		for the following amou a bank located in the	-		proce	essed by this office must be paya	ble in US
(\$25 fi & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status		180.00 Fili Certified C		X S185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection Corporations 27			New Divi The 2415	ret Address: Filing Section Sision of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 Sahassee, FL 32303	

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

SEAST 18 AM 10: 55

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.

1.	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Bunn Properties II, LLC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fi	rst organized, formed or incorporated under the laws ofNorth Carolina
	(Enter state, or if a non-U.S. entity, the name of the country)
Ωn	August 5, 2011
OI.	August 5, 2011 (date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
	Bunn Properties II, LLC
_	(Enter Name of Florida Limited Liability Company)
4.	If not effective on the date of filing, enter the effective date:
(T	he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after e date this document is filed by the Florida Department of State.)
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cument'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 20 day of October	_20 <u>_20</u>	į
Signature of Authorized Representative of Limi	ited Liability Company:	
Signature of Authorized Representative:	Title: Manager	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: White L. Bunn Printed Name: Wilton L. Bunn	Title: Manager	1
Signature:Printed Name:		
Signature:		
Printed Name:		
Signature:		•
Printed Name:	Title:	
Signature: Printed Name:		!
Signature:		
Printed Name:	Title:	İ
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of 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 Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		: i
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)	: : :

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Bunn Prop	erties II, LLC	
		ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing add		ne principal office of the Limited	Liability Company is
Principal Offic	ce Address:	Mailing Address:	
1895 7th Street :	South	1895 7th Street South	
ARTICLE III	- Registered Agent, Regist	Naples, FL 34102 ered Office, & Registered Ager	
ARTICLE III The Limited Liabili business entity with	- Registered Agent, Regist	ered Office, & Registered Ager Registered Agent. You must designate an in	dividual or another
ARTICLE III The Limited Liabili business entity with	- Registered Agent, Registive Company cannot serve as its own In an active Florida registration.) The Florida street address of the Florida street address	ered Office, & Registered Ager Registered Agent. You must designate an in	dividual or another
ARTICLE III The Limited Liabili business entity with	- Registered Agent, Registity Company cannot serve as its own In an active Florida registration.) The Florida street address of the Wood Bucket	ered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are:	dividual or another 2020 OCT 21 AI
ARTICLE III The Limited Liabili business entity with	- Registered Agent, Registity Company cannot serve as its own In an active Florida registration.) The Florida street address of the Wood Bucket	ered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are:	dividual or another 2020 OCT 21 AI
ARTICLE III The Limited Liabili business entity with	- Registered Agent, Registive Company cannot serve as its own In an active Florida registration.) The Florida street address of the Wood Bucket No. 2150 Goodlette	ered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are: Sel & Carmichael, PLLC	dividual or another 2020 OCT 21 AH 11:
The Limited Liabili business entity with	- Registered Agent, Registive Company cannot serve as its own In an active Florida registration.) The Florida street address of the Wood Bucket No. 2150 Goodlette	ered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are: el & Carmichael, PLLC l'ame e Road N, Sixth Floor	dividual or another 2020 OCT 21 AI

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)

<u>Γitle:</u>	Name and Address:
'AMBR" = Authorized Member	
MGR" = Manager	MEN. 1 B
MGR	Wilton L. Bunn
	1865 7th Street South
	Naples, FL 34102
	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	Vn
10121002.0	Y
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the to the Department of State constitutes a third degree fel
	Wilton L. Bunn, Manager
	ped or printed name of signee

ARTICLE IV-