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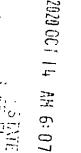
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(Add	dress)	
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(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	····
Certified Copies	_ Certificate:	s of Status
Special Instructions to I	Filing Officer:	

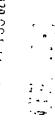
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An

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: PAINTED DREAMS RANCH,	LLC			
	Resulting Florida Li	imited Cor	mpany)	
The enclosed Articles of Conversion, Ar Business Entity" into a "Florida Limited	•			
Please return all correspondence concern	ning this matter t	o :		
Nancy Gold				
(Contact Person)				
Law Offices of Gold & Parado				
(Firm/Company)				
9200 South Dadeland Blvd, Suite 208				
(Address)				
Miami, FL 33156				
(City, State and Zip Cod	e)			
nancy@acgoldlaw.com				
E-mail Address: (to be used for future annua	I report notifications	5)		
For further information concerning this	matter, please ca	11:		
Nancy Gold	at (³⁰⁵) ⁶⁶⁷⁻	0475	
(Name of Contact Person)	(Area Co	de) (Day	vtime Telephone Number)	
Enclosed is a check for the following and dollars and drawn on a bank located in the	•	•	sed by this office must be p	ayable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\int \$155.00 Filing Fee and Certificate of Status	es		□\$185.00 Filing Fees. Certified Copy. and Certificate of Status	700 0CT
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810	H M 6:
Tarranassee, 1 D 52517			hassee, FL 32303)7 5F

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: PAINTED DREAMS RANCH, INC.
(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.
First organized, formed or incorporated under the laws of
(Enter state, or it a non-U.S. entity, the name of the country)
March 18, 2003 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PAINTED DREAMS RANCH, 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.
2020 CC

Signed this 5	day of October	20 20
Signature of Autho	rized Depresentative of	Limited Listoility Company:
Signature of Autilo	ined Representative of	Elitited Elaphy Company.
	zed Representative:	
Printed Name: ALAN	C. GOLD	Tiple: LEGAL REPRESENTATIVE
		ity: [See below for required signature(s)]
Signature:	retta Schne	der
Printed Name: LORET	TTA SCHNEIDER	Title: AMBR
Signature: Max	1 Shails	
Printed Name: MARK	SCHNEIDER	Title: AMBR
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:	 	Title:
C		
Signature:		Title:
rimed Name		Title
Signature:		
		Title:
	ın, Vice Chairman, Directo	or, or Officer. an Incorporator must sign.
If Florida General P	Partnership or Limited L	iability Partnership:
Signature of one Gen		
•		iability Limited Partnership:
Signatures of ALL G		avinty Dillited 1 at the sing.
All others: Signature of an autho	rized person.	
Fees:		
Articles of C	onversion:	\$25.00

Articles of Conversion: \$25.00
Fees for Florida Articles of Organization: \$125.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	me.				
	imited Liability Com	npany is:			
PAINTED DREAMS					
(M	ust contain the words "Limi	ted Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Ac The mailing addre		of the principal office of the Limite	d Liabilit	y Comp	any is:
Principal Office A	Address:	Mailing Address:			
3490 NE 140 AVEN		3490 NE 140 AVENUE			
WILLISTON, FL 326	596	WILLISTON, FL 32696			
(The Limited Liability C business entity with an	ompany cannot serve as its active Florida registration.)	egistered Office, & Registered Agrown Registered Agent. You must designate an so of the registered agent are:	ent's Sign individual or	nature:	
	ALAN C. GOLD, PA				
		Name			
		Boulevard, Suie 208			
		ess (P.O. Box <u>NOT</u> acceptable)			
	Miami, FL	FL 33156			
	City	Zip			
liability comp registered agent statutes relating	any at the place designand agree to act in the groper and colligations of my position. Registered Agen	ent and to accept service of process for gnated in this certificate, I hereby acciss capacity. I further agree to complete performance of my duties, as on as registered agent as provided for s Signature (REQUIRED)	cept the ap ly with the ad I am fai	opointm provisi miliar w	ent as ons of al rith and
			Çi çe	<u></u>	÷.

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Сотралу:

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
.vioit ivianagei		
AMBR	LORETTA SCHNEIDER	
	3490 NE 140 Avenue	
	Williston, FL 32696	
AMBR	MARK SCHNEIDER	
	3490 NE 140 Avenue	
	Williston, FL 32696	
	,	
(Use attachment if necessary)		
CLE V: Other provisions, if any.		
	Erica S	
	च्या १	
	· = 0	
REQUIRED SIGNATURE:		
MailShile		
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware nent to the Department of State constitutes a third degree for	
MARK SCHNEIDER		
Tyr	ped 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)