L20000 396373

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2020 DEC 28 AH 9: 54

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

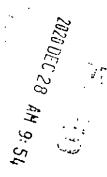
DATE 12/28/2020			*	*WALK IN*
ENTITY NAME TAVIST	OCK CAYLAND, LLC			
LIVITT NAME				
DOCUMENT NUMBER_				
	PLEASE FILE THE	ATTACHED AND RETUR	PN	
XXXX	Plain Copy			
<u></u>	Certified Copy			
	Certificate of Status			
#	Certified Copy of Arts & Certificate of Good Stand	& Amendments	E ENTITY	·
	APOSTILLE' / NO	TARIAL CERTIFICATION	DN	
COUNTRY OF DESTINAT	TON			
NUMBER OF CERTIFICAT	TES REQUESTED			
TOTAL OWED\$150.00			±: I20160000072	
Please call Tina at th	e above number for an			ch!

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: Taylstock Cayland Corp.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation P12000 104 318 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et
First organized, formed or incorporated under the laws of [Florida (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
December 28, 2012 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 Tavistock Cayland, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: December 31, 2020 (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
(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.



Signed this 2.3rd day of Occar ber	20:20
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: Printed Name: Thomas B. Youth	Title: Authorized Signatory
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Thomas B. Youth	
Printed Name: Indmas B. Youth	Title: President
Signature:	
Printed Name:	Title:
Signature:	av.
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Off Directors or Officers have not been selected, an Inc.	Officer,
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	· ·
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	v 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)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Tavistock Cayland	į, LLC				
(1	Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - A	Address:				
The mailing addi	ress and street address of	the principal office of the Limited Lia	bility Compan	y is:	
Principal Office	Address:	Mailing Address:			
9350 Conroy Wind	dermere Road	9350 Conroy Windermere Road			
Windermere, FL 3	4786	Windermere, FL 34786			
(The Limited Liability business entity with a	Company cannot serve as its own in active Florida registration.)	stered Office, & Registered Agent's a Registered Agent. You must designate an individent fithe registered agent are:	Signature:	2020	
(The Limited Liability business entity with a	Company cannot serve as its own in active Florida registration.) e Florida street address o	n Registered Agent. You must designate an individ	Signature: fual or another	2020 DEC	1
(The Limited Liability business entity with a	Company cannot serve as its own in active Florida registration.)	n Registered Agent. You must designate an individ	Signature: fual or another	2020 DEC 28	41
(The Limited Liability business entity with a	Company cannot serve as its own in active Florida registration.) e Florida street address o	n Registered Agent. You must designate an individend of the registered agent are:	Signature:	C 28	200 mg
(The Limited Liability business entity with a	Company cannot serve as its own an active Florida registration.) e Florida street address o CT Corporation System 1200 S. Pine Island Roa	n Registered Agent. You must designate an individend of the registered agent are:	Signature:	C 28 AH	1
(The Limited Liability business entity with a	Company cannot serve as its own an active Florida registration.) e Florida street address o CT Corporation System 1200 S. Pine Island Roa	n Registered Agent. You must designate an individent of the registered agent are: Name	Signature:	C 28	1

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..

James M. Halpin

Assistant Secretary

Registered Agent's Signiture (REQUIRED)

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(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	To delegate Comments on
Alvida	Tavistock Corporation 9350 Conroy Windermere Road
	Windermere, FL 34786
	
(Use attachment if necessary)	
(Ose attachment in necessary)	
LE 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.

Thomas B. Youth

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)