121000002296

	(Re	questor's Name)	
	(Ad	dress)	
	•	,	
	(Ad	dress)	
•	(Cit	y/State/Zip/Phon	e #)
FIC	K-UP	☐ WAIT	MAIL
	(Bu	siness Entity Na	me)
	(Do	cument Number))
	•	,	
Certified Copi :s		_ Certificate:	s of Status
Special Instruct	tions to	Filing Officer:	

Office Use Only

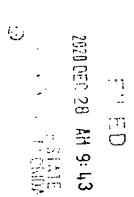
1/12 mil 332/15

JAN 0 6 2021 T. SCOTT



800354795518

11/09/20--01038--020 **180.00



COVER LETTER

TO:	New Filing S D vision of C				Ý	
SUBJ	JECT:	3447 Wes	t Kenne	edy Blvd	., LLC	
0020		(Name of Re	sulting	Florida L	imited Co	mpany)
The e Busin	nclosed Article less Entity" into	es of Conversion, Artic o a "Florida Limited L	cles of iability	Organiz y Comp	zation, ar any'' in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g this	matter t	0:	
		V. Stephen Cohen				
		(Contact Person)				
	Bajo	Cuva Cohen & Turkel, P	.A.			
		(Firm/Company)				
	100 N	Tampa Street Suite 190	0			
	-	(Address)				
	Ta	ampa, Florida 33602				
		City, State and Zip Code)				
	S	cohen@bajocuva.com				
E-n	nail Address: (to b	oe used for future annual re	port no	tification		
For fu	ırther informati	on concerning this ma	tter, pl	lease ca	11:	
	V. Stephe	n Cohen	at (813	١	868-6162
	(N ime of Conta	act Person)	_	(Area Co	de) (Day	vtime Telephone Number)
		for the following amou a bank located in the				sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles unization)	□\$155.00 Filing Fees and Certificate of Status		80.00 Fil Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Ta Jahassee, I	ection orporations 7			New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

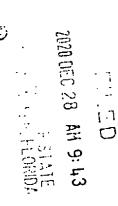
Tallahassee, FL 32303

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: 3447 West Kennedy Blvd., Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
04/09/1006
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: 3447 West Kennedy Blvd., 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.



Signed this grand day of November	20
Signature of Authorized Representative of Lim	ited·Liability Company:
Signature of Authorized Representative: Printed Name: Eugene O'Steen	su Steen
Printed Name: Eugene O'Steen T	Title: Managing Member
Signature(s) on behalf of Other Durings Potition	(See heless feet and A.
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Comman Moen	
Signature: Signature: Steen Steen	Title: D, P, S & T
Signature:Printed Name:	Tid-
rinted Name.	1ttle:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
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	corporator must sign.
	-
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:
Signature of one General Partner.	
lf Florida Limited Partnership or Limited Liabili	ty Limited Partnershin:
Signatures of ALL General Partners.	
. 11 . 41	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
	V 1 /

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

s:		
edy Blvd., LL	C	
		<u>')</u>
principal of	fice of the Lim	nited Liability Company is:
Mailing	Address:	
3420 We	est North A Stre	et
Tampa,	Florida 33609	
	agent are:	
. Diaz		
ne		
_		
O. Box <u>NO</u>	$\underline{\Gamma}$ acceptable)	
F <u>L</u>	33609	
	Zip	
in this certifucity. I furthe performance gistered ag	icate, I hereby a er agree to con se of my duties, ent as provided	nply with the provisions of al and I am familiar with and
	principal of Mailing 3420 We Tampa, ed Office, & distered Agent. Ye registered a Diaz ne oulevard Sui O. Box NO FL to accept se in this certifacity. I furth a performance egistered ag	edy Blvd., LLC ility Company, "L.L.C.," or "LLC." principal office of the Lim Mailing Address: 3420 West North A Stre Tampa, Florida 33609 ed Office, & Registered A cistered Agent. You must designate e registered agent are: Diaz ne oulevard Suite 310 O. Box NOT acceptable) FL 33609 Zip to accept service of process in this certificate, I hereby acity. I further agree to con

- ARTICLE ĮV-	
The name and address of e Company:	each person authorized to manage and control the Limited Liability
Tido.	Nome and Address.

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Eugene O'Steen
	3420 West North A Street
	Tampa, Florida 33609
MGR	Eugene O'Steen
	3420 West North A Street
	Tampa, Florida 33609
(Use attachment if necessary)	
I F V: Other provisions, if any	
EL V. Other provisions, it any.	
LE V: Other provisions, if any.	

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.

Eugene O'Steen

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)