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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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#### **COVER LETTER**

TO:	New Filing S Division of C					
SUB.	JECT: LandaC	orp LLC				
			sulting Florida	Limited C	ompany)	<del></del>
The c Busir	enclosed Article ness Entity" into	es of Conversion, Artico o a "Florida Limited L	cles of Organi liability Comp	ization, a pany" in	and fees are submitted accordance with s. 6	d to convert an "Other 05.1045, F.S.
Pleas	e return all com	respondence concernir	ig this matter	to:		
Jeffre	y S. Bibby, CPA					
		(Contact Person)				
JSB T	ax Services LLC	· · · · · ·				7771 FT 722
		(Firm/Company)	<del></del>	<del></del>		ز - د
48 Po	wer Road					
	-	(Address)		<del></del>		70 13
Pawtu	icket, RI 02860					F11 14: 07
	(	City, State and Zip Code)		<del>_</del>		
jbibby	@jsbtaxservices	.com				
E-r	nail Address: (to b	e used for future annual re	port notification	ns)		
For fu	irther informati	on concerning this ma	itter, please ca	ıll:		
Jeffre	y S. Bibby, CPA		at ( <sup>401</sup>	<sub>\</sub> 475	5-6960	
	(Name of Conta	act Person)		<u> </u>	aytime Telephone Numbe	<del></del>
Enclo dollar	sed is a check f s and drawn on	for the following amou a bank located in the	int: (All checl United States	ks proces	ssed by this office mu	ist be payable in US
(\$25 to & \$125	0.00 Filing Fees or Conversion of for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fi and Certified	ling Fees Copy	SI\$185.00 Filing Fee Certified Copy, and Certificate of Status	5,
	Mailing Addr New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New Divis	et Address:  Filing Section sion of Corporations Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### **Articles of Conversion**

For

#### "Other Business Entity"

Into

## Florida Limited Liability Company

1-11 271FF7 22 PM 1:08

The Articles of Conversion and attached Articles of Organization 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: LandaCorp 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 ofRhode Island
(Enter state, or if a non-U.S. entity, the name of the country) 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:  LandaCorp 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.

day of January	20
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative: Printed Name: Cynthia Landa	
Printed Name: Cynthia Landa	Title: Member
Signature(s) on behalf of Other Business Entity:	
10.0A	[ salar of argument (3)]
Signature:	
Signature: Printed Name: Lythia, Lando	7_Title:Mombler
Signature: Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	Tido
- Think I valid.	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
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>-</u>
If Florida General Partnership or Limited Liabil	ity Partnership:
Signature of one General Partner.	
If Florida Limited Daytus-shirt and Line Living	
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
deficial taltiers.	
All others:	
Signature of an authorized person.	
<del><sup>2</sup>ces:</del>	
Articles of Conversion:	#25.00
	\$25.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00
Certificate of Status:	\$30.00 (Optional)
Continuate of Status.	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
LandaCorp LLC		
(Must contain the words "Limited Lia	ibility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
2240 NE 62nd Street	2240 NE 62nd Street	
Fort Lauderdale, FL 33308	Fort Lauderdale, FL 33308	<del></del>
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's	Signature: dual or another
		. ~?
The name and the Florida street address of th	e registered agent are:	· = = = = = = = = = = = = = = = = = = =
Cynthia Landa		
Na	me	22
2240 NE 62nd Street		-D ·
Florida street address (P	.O. Box NOT acceptable)	
Fort Lauderdale	FL 33308	08

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)

#### ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	
AWIDK	Cynthia Landa
	2240 NE 62nd Street
	Fort Lauderdale, FL 33308
(Use attachment if necessary)	
*/	
CLE V: Other provisions, if any.	
· ·	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member or a	л authorized representative of a member
Signature of a member or a	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that
Signature of a member or at This document is executed in accordance wany false information submitted in a document	with eaction AUS 0202 (1) /k) PI' i o
Signature of a member or a.  This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.	with eaction AUS 0202 (1) /k) PI' i o
Signature of a member or a: This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.  Cynthia Landa	with section 605.0203 (1) (b), Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felong
Signature of a member or a: This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.  Cynthia Landa	with eaction AUS 0202 / 13 / la triangle ou

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)