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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer	
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#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

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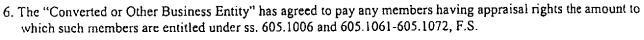
Date:

	Acc#i20160000072
Name:	Dykman Investments, LLC
Document #:	
Order #:	13611898
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of	
Apostille/Notarial Certification:	Country of Destination:  Number of Certs:
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Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount: \$ 150.00
	Thank you!

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

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:  Dykman Investments, LLC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
	etc.)
First organized, formed or incorporated under the laws of	
October 3, 2005	
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	n:
Dykman Investments, 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 at 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.	





,					
Signed this _	6th	_day of _	April	2	20_21
Signature o	f Author	ized Repr	esentative (	of Limited	Liability Company:
Signature of	Authori	zed Repres	entative:	- Dag Corrighe	•
Printed Nam	e: <u>Dougla</u>	s D. Dykma	n		Title: Manager
Signature(s)	on beha	lf of Other	Business E	Intity: [Se	e below for required signature(s)]
Signature: _	بالخنجين العزل	( / <sup>1</sup> Fa			
Printed Nam	e: Dougla	s D. Dykma	an		Title: Manager
Signature					
Printed Nam	e:				Title:
Signature: _	<u>.                                    </u>		<del></del>		Title:
I IIIICU Naii	.c		<del></del>		True.
Signature: _			<del></del>		Title:
Printed Nam	ie:			<del></del>	Title:
Signature:					
Printed Nam	ie: <u> </u>				Title:
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Printed Nam	iė:	<del></del>			Title:
If Florida C			alaan Dia		DC
			airman, Dire been selecte		rporator must sign.
				·	•
				d Liability	Partnership:
Signature of	one Ger	ierai Partne	er.		
If Florida I Signatures o				d Liability	Limited Partnership:
All others: Signature of	f an autho	orized pers	on.		
Fees:		•			
<del></del>					
		Conversion			\$25.00
	s tor Flo tified Co		es of Organi		\$125.00 \$30.00 (Optional)
		of Status:			\$5.00 (Optional)
					,

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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Dykman Investme	ents. LLC			
	Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")		
ARTICLE II	Address:			
The mailing add	ress and street address of the p	orincipal office of the Limited L	iability Com	pany is:
Principal Office	e Address:	Mailing Address:		
1584 Caribbean I	Drive	1584 Caribbean Drive		
Sarasota, Florida	34231	Sarasota, Florida 34231		
APTICLE III.	- Registered Agent Register		's Signature	·:
(The Limited Liability business entity with	y Company cannot serve as its own Reg an active Florida registration.)	ed Office, & Registered Agent istered Agent. You must designate an indi	vidual or another	t
(The Limited Liability business entity with	y Company cannot serve as its own Reg an active Florida registration.) he Florida street address of the	ed Office, & Registered Agent istered Agent. You must designate an indi	e's Signature	t
(The Limited Liability business entity with	y Company cannot serve as its own Reg an active Florida registration.)	ed Office, & Registered Agent istered Agent. You must designate an indi e registered agent are:	vidual or another	2021 APR -8
(The Limited Liability business entity with	y Company cannot serve as its own Reg an active Florida registration.) he Florida street address of the Douglas D. Dykman	ed Office, & Registered Agent istered Agent. You must designate an indi e registered agent are:	vidual or another	2021 APR -8 PA
(The Limited Liability business entity with	y Company cannot serve as its own Reg an active Florida registration.)  he Florida street address of the Douglas D. Dykman  Nat	ed Office, & Registered Agent istered Agent. You must designate an indi e registered agent are:	vidual or another	2021 APR -8 PA
(The Limited Liability business entity with	y Company cannot serve as its own Reg an active Florida registration.)  he Florida street address of the Douglas D. Dykman  Nat	ed Office, & Registered Agent istered Agent. You must designate an indice registered agent are:	vidual or another	2021 APR -8

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> Fitle:</u>	Name and Address:
'AMBR" = Authorized Member	
"MGR" = Manager	Develop D. Dukerne
MGR	Douglas D. Dykman 1584 Caribbean Drive
	Sarasota, Florida 34231
	Sarasota, Florida 3423 t
777 A	·
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	Doy to, J. Bken MD
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	and the first distributed for the whole
	r an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware
any false information submitted in a doc	ument to the Department of State constitutes a third degree for
as provided for in s.817.155, F.S.	
•	
Douglas D. Dykman	yped or printed name of signee

ARTICLE IV-