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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	_
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: North Area Lalo Investors LLC
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion. Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Story Lonesome Group LLC (Firm/Company)
Scol Bridge St # 1413 (Address)
Tampa FL 33611 (City. State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Sean Drake at (203) 247 - 2479 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
S150.00 Filing Fees (\$25 for Conversion and Certificate of Status (\$25 for Articles of Organization) S150.00 Filing Fees (\$185.00 Filing Fees and Certified Copy (Certified Copy and Certificate of Status)
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 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.

Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: North Area Law Investors LLC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited limb. 1, my Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized formed or incorporated under the laws of Connecticut
First organized, formed or incorporated under the laws of Connecticn+ (Enter state, or if a non-U.S. entity, the name of the country)
on 10-1-2009 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
North Area Lalo Investors LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: filing Jete. (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.
20

Signed this 23 day of June	20 21
Signature of Authorized Representative of Lim	
Signature of Authorized Representative:	Title: managing Member
Signature(s) on behalf of Other Business Entity:	
Signature: Sean D Prate	_Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
North Area Lalo Inve	Stors LLC Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5001 Bridge # St Unit 1413 Tampa FL 33611	Same
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another egistered agent are:
<u>Séan Drake</u> Name	
Sool Bridge St. Florida street address (P.O.	Unit 1413 Box NOT acceptable)
Tam.24	FI 33611
Tampa	Zip
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S

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

"AMBR" = Authorized Member "MGR" = Manager	Seco Deak
	Stan Drake Soci Bridge St Unit 1413 Tampa FL 33611
	2021 JUI
(Use attachment if necessary)	- 7 AH 9:
CLE V: Other provisions, if any.	- 2 <u>.</u> - 22

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