171000316787

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

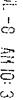
J. FASON JUL 1 2 2021

11/



300355797023

01/07/21--01009--021 **150.00



COVER LETTER

TO: New Filing S Division of C		•		
SUBJECT: DEER N	MEADOW INVESTMENT	S, LLC		
	(Name of Re	sulting Florida Limi	ted Con	npany)
				d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
GREG KILEY				
	(Contact Person)		-	
PKF O'CONNOR DAV	/IES LLP			
	(Firm/Company)		-	
500 MAMARONECK	AVE			
	(Address)		-	
HARRISON, NY 1052	8			
((City, State and Zip Code)		_	
GKILEY@PKFOD.CO	M			
E-mail Address: (to b	e used for future annual re	port notifications)	-	
For further informati	on concerning this ma	tter, please call:		
GREG KILEY		_at (669-6	8007
(Name of Conta	act Person)	(Area Code)	(Day	time Telephone Number)
	for the following amou a bank located in the		rocess	ed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add New Filing S Division of C P.O. Box 632	ection orporations		New F Divisi	Address: Filing Section on of Corporations entre of Tallahassee
Tallahassee, I	FL 32314			N. Monroe Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



January 25, 2021

GREG KILEY 500 MAMARONECK AVE HARRISON, NY 10528

2021 P. - 3 FI 12: 1 8

SUBJECT: DEER MEADOW INVESTMENTS, LLC

Ref. Number: W21000007387

We have received your document for DEER MEADOW INVESTMENTS, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by an authorized person.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 621A00001674

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 Article DEER MEADOW INVESTMENTS, LLC	es of Conversion is:
(Enter Name of Other Business Entity)	-
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	on law or business trust, etc.)
First organized, formed or incorporated under the laws of	name of the country)
MARCH 14, 2005 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Arti	icles of Organization:
DEER MEADOW 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 9 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 dat 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.	
 The "Converted or Other Business Entity" has agreed to pay any members having appraise which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S. 	sal rights the amount to
	ر
	ස
	<u></u>
	AN 10: 3:
	. ယ တ

	e . x
Signed this day of ansay	20_21
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: MICHAEL FRIEDMAN	Title: MEMBER
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Mullilee	The state of the s
Printed Name: MCHAEL FAEPHAN	Title: Married
Signature:	
Signature: Printed Name:	Title:
Clamatura	
Signature: Printed Name:	_ Title:
Signature:	Till.
Printed Name:	Title:
Signature:	
Printed Name:	Title:
0'	
Signature: Printed Name:	Title
Frinted Name.	Tipe.
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL 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:	
DEER MEADOW INVESTMENTS, LLC (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5760 BRIDLEWAY CIRCLE BOCA RATON, FL 33496	5760 BRIDLEWAY CIRCLE BOCA RATON, FL 33496
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re-	gistered agent are:
MICHAEL FRIEDMAN	<u></u>
Name	
5760 BRIDLEWAY CIRCLE	
Florida street address (P.O.	Box NOT acceptable)
BOCA RATON	FL_ ³³⁴⁹⁶
City	Zip

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	MICHAEL FRIEDMAN	
	5760 BRIDLEWAY CIRCLE	
	BOCA RATON, FL 33496	•
AMBR	LOIS FRIEDMAN	
	5760 BRIDLEWAY CIRCLE	
	BOCA RATON, FL 33496	
		20
		<u> </u>
(Use attachment if necessary)		≘
		ယ
		·
CLE V: Other provisions, if any.		
DECLUDED CLOSUTUDE.		
REQUIRED SIGNATURE:		
/ 1 11/11 /		

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.

MICHAEL FRIEDMAN

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)