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Certified Copies	Certificates	of Status
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Special Instructions to F	Filing Officer:	

Office Use Only



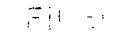
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#### **COVER LETTER**



TO: New Filing Section Division of Corporations 2621.301.15 #110:47

SUBJECT:	Oceanfront North, 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:

Charles M. Lax, Esq.		
(Contact Person)		
MADDIN HAUSER		
(Firm/Company)		
28400 Northwestern Highway, Second Floor	r	
(Address)	<del></del>	
Southfield, Michigan 48034		
(City, State and Zip Code)	:)	
tjgusmano@gmail.com		
E-mail Address: (to be used for future annual	report notifications)	
For further information concerning this m	natter, please call:	
Charles M. Lax	at ( 248 ) 827-1877	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amodollars and drawn on a bank located in the	nount: (All checks processed by this office must be pay the United States)	able in US

□\$180.00 Filing Fees □\$185.00 Filing Fees, □\$155.00 Filing Fees S150.00 Filing Fees Certified Copy, and (\$25 for Conversion and Certificate of and Certified Copy Certificate of Status & \$125 for Articles Status of Organization)

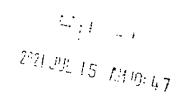
### Mailing Address:

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

# 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.

l.	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Oceanfront North, LLC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a [Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
Fi	rst organized, formed or incorporated under the laws of
or	December 26, 2017
٠.	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
	Oceanfront North, LLC
_	(Enter Name of Florida Limited Liability Company)
	If not effective on the date of filing, enter the effective date:
th No	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.)  ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cument'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 <u>22</u> day of <u>June</u>	_ 20_21
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:	72
Signature of Authorized Representative:	Authorized Agent
Printed Name: Thomas J. Gusmano	
Signature(s) on behalf of Other Business Entity:	(See below for required signature(s)
	[See below for required signature(s)]
Signature:	
Printed Nante: Thomas J. Gusmano	Title: Authorized Agent
Signature:	
Printed Name:	Title:
C'	
Signature:Printed Name:	Title
rinned Name.	1100
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Clauda Compositions	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In-	
if bilectors of Officers have not been selected, an in-	corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u>	ty Partnership:
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
All salesum	
All others: Signature of an authorized person.	
Signature of an authorized person.	
Fecs:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	S5.00 (Optional)
certificate of citation	/ ( <b>* L</b> )

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	2021 JUL 15 All 10: 47
The name of the Limited Liability Company is	: · · · · · · · · · · · · · · · · · · ·
	_
Oceanfront North, LLC	
(Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
19739 Beechcrest Place	19739 Beechcrest Place
Estero, Florida 33928	Estero, Florida 33928
business entity with an active Florida registration.)  The name and the Florida street address of the  Thomas J. Gusmano	registered agent are:
Nam	ne
19739 Beechcrest Place	
Florida street address (P.C	D. Box NOT acceptable)
Estero	FI. <sup>33928</sup>
City	Zip
liability company at the place designated in registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered 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:

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager AMBR	Name and Address:  Thomas J. Gusmano, Trustee of the Thomas Joseph Gusmano Revocable Living Trust Agreement dated September 16, 2014	
	Estero, Florida 33928	
<del></del>	<del></del>	
	• • • • • • • • • • • • • • • • • • • •	
<del></del>		
(Use attachment if necessary)		
7,		
RTICLE V: Other provisions, if any.		
REQUIRED SIGNATURE:		

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.

Thomas J. Gusmano, Authorized Agent

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)