# 12100346463

(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:
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## **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: Motley's Crew, LLC		
(Name of Res	sulting Florida Lim	mited Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li		ation, and fees are submitted to convert an "Other my" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	):
Jeffrey D. Thompson		
(Contact Person)		
(Firm/Company)		
3723 E. County Hwy 30A		<u> </u>
(Address)		
Santa Rosa Beach, FL 32459		
(City, State and Zip Code) jeff@benchmark30a.com		
E-mail Address: (to be used for future annual re	nort natifications)	<u> </u>
For further information concerning this ma		
Marc D. Fine	·	
(Name of Contact Person)	_at ( at Code	de) (Daytime Telephone Number)
	int: (All checks	s processed 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 Co	
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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Motley's Crew, Inc.
(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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
3/2/1992 on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Motley's Crew, 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.

Signed this 23 day of July	20_21
Signature of Authorized Representa	
Signature of Authorized Representative	re:Title: Manager
Printed Name: Jeffrey D. Thompson	Title: Manager
Signature(s) on behalf of Other Busin	ness Entity: [See below for required signature(s)]
	•
Signature:	
Printed Name: Jeffrey D. Mompson	Title: President
, , , , , , , , , , , , , , , , , , ,	
Signature: Kann R. Thompson	'I''-l Socretory
Printed Name: Naren R. Thompson	Title: Secretary
Signature:	
Printed Name: Jon Miller	Title: Treasurer
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
63	
Signature:	Title:
rimed Name.	Title.
If Florida Corporation:	
Signature of Chairman, Vice Chairman,	. Director, or Officer.
If Directors or Officers have not been so	
If Florida General Partnership or Lin	nited Liability Partnership:
Signature of one General Partner.	
If Etanida I imitad Dantmanahin an I in	mitted I inhility I insitud Dautmanching
If Florida Limited Partnership or Lin Signatures of <u>ALL</u> General Partners.	miled Liability Limited 1 artifership.
organitation of seaso veneral randers.	
All others:	
Signature of an authorized person.	
•	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Or	
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company	y is:
Motley's Crew. LLC	
	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
59 Campbell Street	3723 E. County Hwy 30A
Seagrove Beach, FL 32459	Santa Rosa Beach, FL 32459
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
The name and the Florida street address of	the registered agent are.
Jeffrey D. Thompson	
,	Vame
3723 E. County Hwy 30A	
Florida street address (	(P.O. Box NOT acceptable)
Santa Rosa Beach	F1 32459
City	Zip
liability company at the place designate registered agent and agree to act in this constantes relating to the proper and compared accept the obligations of my position at Registered Agent's	and to accept service of process for the above stated limited ed in this certificate. I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S  Signature (REQUIRED)

#### ARTICLE IV-

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

Title:	
"AMBR" = Authorized Member	
"MGR" = Manager	leffcou D. Thompson
MGR	Jeffrey D. Thompson 3723 E. County Hwy 30A
	Santa Rosa Beach, FL 32459
	Santa Nosa Beach, FE 32435
	<del></del>
(Use attachment if necessary)	
ELE V: Other provisions, if any.	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	<u> </u>
	y
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felony
Signature of a member or a This document is executed in accordance any false information submitted in a document i	with section 605.0203 (1) (b), Florida Statutes. I am aware that
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Jeffrey D. Thompson	with section 605.0203 (1) (b), Florida Statutes. I am aware that
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Jeffrey D. Thompson Typ	with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee  Filing Fees
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Jeffrey D. Thompson Typ	with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee  Filing Fees
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Jeffrey D. Thompson Typ	with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee  Filing Fees of Organization and Designation of Registered Ageral)  S 5.00 Certificate of Status (Optional)
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Jeffrey D. Thompson  Typ  \$125.00 Filing Fee for Articles of	with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony ped or printed name of signee  Filing Fees of Organization and Designation of Registered Ageral)  S 5.00 Certificate of Status (Optional)
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