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## **COVER LETTER**

TO: New Filing S	ection			
Division of C	Corporations			
SUBJECT: Ironston		sulting Florida Limit	ed Cor	npany)
				nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
Stanley Cofer				
	(Contact Person)			
Ironstone Group LLC				
	(Firm/Company)			
P O Box 2297				
	(Address)			
Santa Rosa Beach, Fl	_ 32459			
(	City, State and Zip Code)			
stan@ironst.biz				
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
Stan Cofer		at ( 770	310-	5033
(Name of Conta	ect Person)	_ \	(Day	rtime Telephone Number)
	for the following amount a bank located in the		rocess	sed 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	ress:		Street	t Address:

New Filing Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

**Street Address:** 

New Filing Section

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

# **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: Ironstone Group LLC as Foreign Entity
(Enter Name of Other Business Entity)
The "Other Business Entity" is a Foreign LLC  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(Enter entity type: 1.xample: ettiporation, finnted partnership, general partnership, confinon law of business flust, etc.
First organized, formed or incorporated under the laws of FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)
on <u>8 - 1</u> 2 - 2014
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Ironstone Group 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 9th d	ay of November	20 <u></u> 21
Signature of Authorize	d Representative of Lim	ited Liability Company:
Signature of Authorized Printed Name: Stanley J C	Representative:	Title: Managing Member
Signature(s) on behalf o	f Other Business Entity:	[See below for required signature(s)]
Signature: Godia	ia Coli	
Printed Name: / JoAn.	na loter	Title: <u>Member</u>
Signature:Printed Name:		Title:
Printed Name:		Title:
Signature		
Printed Name:		Title:
Signature:Printed Name:		Title:
Printed Name:		Title:
If Directors or Officers ha	ice Chairman, Director, or ve not been selected, an In	corporator must sign.
If Florida General Partn Signature of one General	e <mark>ership or Limited Liabil</mark> . Partner.	ity Partnership:
If Florida Limited Partn Signatures of ALL Gener	ership or Limited Liabili al Partners.	ty Limited Partnership:
All others: Signature of an authorized	l person.	
Fees:		
Articles of Conve Fees for Florida A Certified Copy: Certificate of Stat	Articles of Organization:	\$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:

Ironstone Group LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

## Mailing Address:

41 Riker Ave

P O Box 2297

Santa Rosa Beach, FL 32459

Santa Rosa Beach, FL 32459

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration )

The name and the Florida street address of the registered agent are:

InCorp Services, Inc.

Name

17888 67th Court North

Florida street address (P.O. Box NOT acceptable)

Loxahatchee

FI. 33470

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.,

Yara Alfaro-Sullivan on behalf of InCorp Services, Inc.
Registered Agent's Signature (REQUIRED)

(CONTINUED)

## ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	_	
Manager	Stanley J Cofer	
	P O Box 2297	
	Santa Rosa Beach, FL 32459	
AMBR	la Anna Orfa	
AWIDA	JoAnna Cofer	
	P O Box 2297	
	Santa Rosa Beach, FL 32459	~
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(Use attachment if necessary)		
LE V: Other provisions, if any.		
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REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:  Signature of a member or a	n authorized representative of a membe	er
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance with the second sec	with section 605.0203 (1) (h) Florida Statutes, Lam	aware
Signature of a member or a This document is executed in accordance vany false information submitted in a document	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I amount to the Department of State constitutes a third decount to the Department of State constitutes a	aware
Signature of a member or a	with section 605.0203 (1) (h) Florida Statutes, Lam	aware

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)