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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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#### **COVER LETTER**

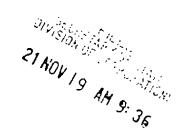
TO:	New Filing Se Division of Co				
SUB.	JECT:	Park Beach (Name of Res	Holdings LLC		
		(Name of Res	ulting Florida Limi	ited Con	npany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corre	spondence concerning	g this matter to:		
	Robert Co	ffey (Contact Person)		_	
		(Contact Person)			
	Park Bench	Holdines LLC			
		(Firm/Company)	-	_	
	2400 N = (6	# CF #411			
	2400 10.1. 6.	(Address)		_	
	Fort Lauderdal	ty, State and Zip Code)		_	
	Robert €	derab.com		_	
E-1	mail Address: (to be	used for future annual rep	port notifications)		
For fu	ırther informatio	n concerning this mat	ter, please call:		
	Robert Coff	ney	at ( 602	) 3	73-9163 time Telephone Number)
	(Name of Contac	(Person)	(Area Code	) (Day	time Telephone Number)
		a bank located in the		process	sed by this office must be payable in US
(\$25 fo	50.00[Riling Pees 🕒	S155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Co	_	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Addr New Faling Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations		New I Divisi The C 2415	Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303

# Articles of Conversion For

## "Other Business Entity"

Into

#### Florida Limited Liability Company



The Articles of Conversion and attached Articles of Organization 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:  Park Beach Holdings LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Arizonc (Enter state, or if a non-U.S. entity, the name of the country)
on 3/4/201\ (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Park Beach Holdings LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 10/25/2021.  (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.

Signature of Authorized Representative of Limi	
Signature of Authorized Representative:Robert Coffey	Tile Marcas
rimed Name. Robert Correg	_ Ittic wanager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Roht UL	
Signature: Robert Chey Printed Name: Robert Chey	_ Title:
/	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
f Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or f Directors or Officers have not been selected, an In-	
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:
signature of one General Farther.	
If Florida Limited Partnership or Limited Liabili Signatures of ALL, General Partners.	ty Limited Partnership:
Signatures of ALL, Ocherar Farmers.	
All others: Signature of an authorized person.	
<u>ees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Comp	any is:			
Park Bench Holding	S LLC			
Park Bench Holding (Must contain the words "Limite	d Liability Company	; "L.L.C.," or "LLC	C.")	
ARTICLE II - Address:				
The mailing address and street address o	f the principal of	office of the Li	mited Liability Comp	any is:
Duinging Office Address	Maili	ng Address:		
Principal Office Address:	<u>wiang</u>	ng Address.		
2400 N.E. 65th St. #411 Fort Lauderdale FL 33308				
Fort Lauderdale FL 33308				
	<del>-</del>		21	DIV.
ARTICLE III - Registered Agent, Reg				S KOISIAID   34334
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)	wn Registered Agen	t. You must designa	<del></del>	20,51-7 20,51-7 21,81
,	of the registers	d agant ara:	9	1.0
The name and the Florida street address	of the registere	u agem are.	Ĭĸ.	
Robert	Offey Name		بي د	i sa se Car
	Name		£.	÷:
2400 N.E. 65	5th St. #411			
Florida street addre		OT acceptable	<del>-</del>	
Fort Lauderdale City	FL	33308 Zip	_	
City		Σib		
	_		c 1 .	

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)

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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 MGR	
<u> </u>	
MGR	0 . 1 0 60
	Robert Coffey
	2400 NE 65th St. #411
	Fort Lauderdele, FL 33308
	· · · · · · · · · · · · · · · · · · ·
···-	
Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	- C/L
REQUIRED SIGNATURE:	- C/L
Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fe
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware ment to the Department of State constitutes a third degree for
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware
LE V: Other provisions, if any.	