L21000523530

(Requestor's Name)				
(Nequestor'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 Edian Office.				
Special Instructions to Filing Officer:				





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2021 DEC 14 Alt 10: 40 SECRETARY OF STATE TALLAHASSEE, FL

CORPORATE

When you need ACCESS to the world

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PICK	UP:	12/14/2021		
xx	CENTILED COLI				
	cus				
xx	FILING	CONVI	ERSION		
1.	TURNKEY, LLC (CORPORATE NAME AND DOCUM	ENT#)		- <u></u> -	
2.	(CORPORATE NAME AND DOCUM	ENT #)			
3.	(CORPORATE NAME AND DOCUMI	ENT #)			
4.	(CORPORATE NAME AND DOCUMI	ENT #)			
5.	(CORPORATE NAME AND DOCUME	ENT #)			
6.	(CORPORATE NAME AND DOCUME	ENT #)			
SPECIA INSTRU	AL JCTIONS:				

FILED

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

2021 DEC 14 PM 1: 04 SECRETARY OF STATE TALLAHASSEE, FL

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: Turnkey, 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
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
April 30, 2015 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Turnkey Group Holdings, 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.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:		
The name of the Limited Liability Compa	iny is:	
Turnkey Group Holdings, LLC		
	Liability Company, "L.L.C.," or "L.L.C.")	
ADTRO CHE AJAMA		
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Lia	dility Company is:
Principal Office Address:		,,,
Tritepar Write Address.	Mailing Address:	
618 East South Street, Suite 500	618 East South Street, Suite 500)
Orlando, FL 32801	Orlando, FL 32801	
(The Limited Linbulity Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of William Wythe		2021 DEC 14 PM 1: 04 SECRETARY OF STATE TALLAHASSEE, FL
	Name	主型 二
618 East South Street, S	Suite 500	TAS
Florida street address	(P.O. Box NOT acceptable)	SE P
Orlando	FL 32801	1: 0 STA E, F
City	Zip	
registered agent and agree to act in this estatutes relating to the proper and compactions of my position accept the obligations of my position of my position accept the obligations of my position of my position accept the obligations of my position of the obligations of my position accept the obligation accept t	ted in this certificate, I hereby accept it supacity. I further agree to comply with	he appointment as The provisions of all In familiar with and

(CONTINUED)

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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	
MGR	Nicholas Bacon
	618 East South Street, Suite 500
	Orlando, FL 32801
MGR	Will Wythe
	618 East South Street, Suite 500
	Orlando, FL 32801
	0.12.60.7.2.02.00.
MGR	Guy Winter
	618 East South Street, Suite 500
	Orlando, FL 32801
	A
•	
(Use attachment if necessary)	AH AS SSEE
(Ose attachment if necessary)	<u> </u>
	£
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
<i>→</i>	
Cianature of a mank and	
This document is executed in recordance	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware that
any false information submitted in a docur as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree felony
MICHICIAS BA	KON CON
Ter	ned or printed name of signes

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)