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(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:

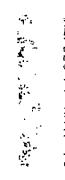
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Philomene Gabriel, Paralegal pgabriel@sgrwlaw.com Direct Dial: 301-634-3173

December 9, 2021

VIA UPS

New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Florida 32303

RE: Articles of Conversion and Articles of Organization for 5813 Family, LLC

Our File No.: 19013.009

Dear Sir or Madam:

Enclosed, please find (i) a check in the amount of \$150.00 for filing fee made payable to Florida Department of State (\$25 for Articles of Conversion + \$125 for Articles of Organization = \$150), and (ii) an originally executed Articles of Conversion and Articles of Organization.

Please feel free to contact me with any questions you may have.

Sincerely yours,

Enclosures

ce: James G. Dattaro, Esq. Neil Gurvitch, Esquire

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: 5813 Family, LLC		
(Name of F	Resulting Florida Limi	nited Company)
The enclosed Articles of Conversion, Art Business Entity" into a "Florida Limited	icles of Organizat Liability Compan	ation, and fees are submitted to convert an "Other ny" in accordance with s. 605.1045, F.S.
Please return all correspondence concern	ing this matter to:):
Jeffrey Snyder		
(Contact Person)		_
5813 Family. LLC		
(Firm/Company)		
250 S Ocean Blvd. Apt 10F		
(Address)		
Boca Raton, FL 33432		
(City, State and Zip Code	:)	_
jmschair@aol.com		
E-mail Address: (to be used for future annual	report notifications))
For further information concerning this n	natter, please call:	l:
Jeffrey Snyder	at ()233-2874
(Name of Contact Person)	(Area Code	de) (Daytime Telephone Number)
Enclosed is a check for the following am dollars and drawn on a bank located in the		s processed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$ \$150.00 Filing Fees and Certificate of Status	s S180.00 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: 5813 Family, 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)
March 11, 2014
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: 5813 Family, 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.
5. 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 29th day of November	2021
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Printed Name: Jeffrey Snyder	Title: Managing Member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Jeffrey Snyder Printed Name: Jeffrey Snyder	Title: Managing Member
Signature: Printed Name:	_ Title:
Signature:Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of Al.L. General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KIICLES OF OKC	JANIZATION FOI	XI LOMIDA GRAITI ED	EIABIETT COMPA.
ARTICLE I - Name: The name of the Limit	ed Liability Compan	y is:	
5813 Family, LLC			
(Must co	ontain the words "Limited L	iability Company, "L.L.C.," or "L	T.C.")
ARTICLE II - Addro The mailing address a		ne principal office of the l	Limited Liability Company is:
Principal Office Add	ress:	Mailing Address:	
250 S Ocean Blvd		250 S Ocean Blvd	
Apt 10F		Apt 10F	
Boca Raton, FL 33432		Boca Raton, FL 334	32
<u>Je</u> 25	ffrey Snyder O S Ocean Blvd, Apt 1		
ŀ	Torida street address	(P.O. Box <u>NOT</u> acceptab	ole)
Во	ca Raton	FL ³³⁴³²	
	City	Zip	
liability company registered agent and statutes relating to	e at the place designal agree to act in this continuous of my position of Registered Agent's	ted in this certificate, I her apacity. I further agree to lete performance of my du	ocess for the above stated limited reby accept the appointment as a comply with the provisions of all uties, and I am familiar with and wided for in Chapter 605, F.S

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager	Infface Country		
MGR	Jeffrey Snyder 250 S Ocean Blvd, Apt 10F		
	Boca Raton, FL 33432		
	Boca (Valori, 1 E 55452		
MGR	Lynn Shapiro Snyder		
MOIT.	250 S Ocean Blvd, Apt 10F		
	Boca Raton, FL 33432		
(Has attachment if pagagary)			
(Use attachment if necessary)			
CLE V: Other provisions, if any.			
_			
REQUIRED SIGNATURE:	1.11 // //		
À	My sole		
	al indication of a mambar		
Signature of a member	or an authorized representative of a member		
This document is executed in accorda	or an authorized representative of a member ance with section 605,0203 (1) (b), Florida Statutes, I am aware locument to the Department of State constitutes a third degree f		

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)