L220000999500

(Requestor's Name)
(Address)
(100.000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiliess Littly Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W22-27923

Office Use Only



800382794538

93/94/22--01001--003 **180.00

TOTAL TO AN BILL

2022 MAR - 3 F. 1 3: 38



12905 SW 42 STREET Suite: 210 MIAMI, FL 33175 Phone: 305-444-4994

Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

(CORPORATE NAME	,	L.L.C. M1600000520 (DOCUMENT#)		
2. (CORPORATE NAME	E) (I	DOCUMENT #)		
3. (CORPORATE NAME		(DOCUMENT #)		
	16.2	<u> </u>		
		Certificate Of Status		
New Filings	Amendments Amendments	Other Filings		
New Filings Profit	Amendments			
New Filings Profit Non-Profit	Amendments Amendments	Other Filings Annual Report		
	Amendments Amendments Resignation	Other Filings Annual Report Fictitious Name		

Examiners Initials

March 4, 2022

EXPRESS

SUBJECT: SBD TRADEWINDS, L.L.C.

Ref. Number: W22000027923

We have received your document for SBD TRADEWINDS, L.L.C. and check(s) totaling \$180.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 022A00005315

Carlos E Rico Regulatory Specialist III

FILED

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

2022 HAR TO AM 8: 11 TRETARY OF STATE TO LLAHASSEE, 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.

SBD TRADEWINDS, L.L.C. M16000000520
(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
on01/08/2016 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SBD TRADEWINDS, L.L.C.
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 01/01/2022 (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 Andland	2022
Signature of Authorized Representative of I	imited Liability Company:
Signature of Authorized Representation and in	
Printed Name: Shlomoh Ben-David	Title: David
St	ridePresident
Signature(s) on behalf of Other Business Eutit	y: (See below for required signature)
Signature: SVM Blow Discourt	and an ear argument et a
Printed Name: Sittemail Best - Days	77.1
Printed Name: SHLEMON BEN - DAVED	Intle: President
Signature: Printed Name:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	77.4
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	771.7
Signature: Printed Name:	I itte:
Signature:	
Printed Name:	Title:
II Florida Cornoration.	
Signature of Chairman Vice Chairman	- OCT -
	i Otneer.
If Directors or Officers have not been selected, an I	DCDTDOrator must size
of Officers have not been selected, an I	ncorporator must sign.
If Florida General Partnership and A	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partner. If Florida Limited Partnership or Limited Liabil	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partner. If Florida Limited Partnership or Limited Liabil	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partnership or Limited Liabil Signatures of ALL General Partners.	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partner. If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners. All others:	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partnership or Limited Liabil Signatures of ALL General Partners. All others: Signature of an authorized person.	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partner. If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners. All others:	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partner. If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners. All others: Signature of an authorized person.	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partnership or Limited Liabil Signatures of ALL General Partners. All others: Dignature of an authorized person. Signature of an authorized person.	ncorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partnership or Limited Liabil Signatures of ALL General Partners. All others: Signature of an authorized person. ees: Articles of Conversion: Fees for Florida Articles of Organization:	lity Partnership: ity Limited Partnership: \$25.00 \$125.00
If Florida General Partnership or Limited Liabil Signature of one General Partner. If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners. All others: bignature of an authorized person. dees: Articles of Conversion:	ity Partnership: ity Limited Partnership: \$25.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:						
The name of the Limited I	Liability Compan	y is:				
SBD TRADEWINDS, L.L.C.						
(Must contain	the words "Limited Li	ability Compan	y, "L.L.C.," or "LLC	. ")	-	
ARTICLE II - Address:						
The mailing address and s	treet address of th	e principal	office of the Lin	nited Liability (Compa	any is:
Principal Office Address: Mailing Address:				-		
2743 Hollywood Blvd Hollyw	Hollywood Blvd Hollywood, FL 33020 2743 Hollywood Blvd Hollywood, FL 33020					
ARTICLE III - Registers (The Limited Liability Company cabusiness entity with an active Florida state of the Flori	nnot serve as its own R ida registration.)	legistered Agen	t. You must designate	Agent's Signat an individual or an	ture: other	
	Shlomoh Ben-Day		a agent are.	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	22 K	
				- 5	版名	estect area
	N	ame		玉马	$\overline{\circ}$	1
274	3 Hollywood Blvd			SSE FO.	-	
Florid	a street address ()	P.O. Box <u>N</u> 0	OT acceptable)	E.F.	8:	
_Hollyw	ood	FL	33020	. TH	_	
	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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u> Fitle:</u>	Name and Address:
'AMBR" = Authorized Member	
"MGR" = ManagerMGR	Shlomoh Ben-David
	2743 Hollywood Blvd Hollywood, FL 33020
	
_	Spire.
	AS CO
Use attachment if necessary)	m m
ose attachment if necessary)	
E V: Other provisions, if any.	
EQUIRED SIGNATURE:	
-in a	in-Durd
Signature of a member or a	n authorized representative of a member
any false information submitted in a docume as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware ent to the Department of State constitutes a third degree f
	EV-DAVIO
_ SHLOMOH B	<u> </u>
SHLOMOH BY	ed or printed name of signee

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

ARTICLE IV-