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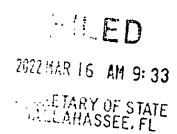
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## **Advanced Incorporating Service**

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: wlopez@aisincfl.com Website: www.aisincfl.com

Bibal ASSOCIATEL, LLC
FOR OFFICE USE ONLY
DIGIC ONE
PICK ONE:
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## 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:  BIBAS ASSOCIATES, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(Enter entity type: Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Einter state, or if a non-U.S, entity, the name of the country)
06/13/2017
Of/13/2017 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BIBAS ASSOCIATES, 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 20TH day of JANUARY	20 <u>22</u> .
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative	
Signature of Authorized Representative: Printed Name: FRANK BIBAS, JR	Title: MANAGING MEMBER
Signature(s) on behalf of Other Business Entity:	-
Signature:Printed Name: Frank Bibas, Jr.	
Printed Name: Frank Bibas, Jr.	Title: <u>Managing Member</u>
Signature:	
Signature:Printed Name:	Title:
Sianatura	
Signature:Printed Name:	Title:
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Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature	
Signature:Printed Name:	Title:
If Florida Corporation:	,
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
if threetors of Officers have not been selected, an in-	corporator must sign.
<u>lf Florida General Partnership or Limited Liabili</u>	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees;	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5,00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BIBAS ASSOCIATES, 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:  660 Bella Vista Court S  Jupiter, FL 33477  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:  Frank Bibas, Jr.  Name  660 Bella Vista Court S  Florida street address (P.O. Box NOT acceptable)  Jupiter  FL 33477  City Zip	ARTICLE I - Name: The name of the Limited I	Liability Company is:				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  Principal Office Address: 660 Bella Vista Court S  Jupiter, FL 33477  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:  Frank Bibas, Jr.  Name 660 Bella Vista Court S  Florida street address (P.O. Box NOT acceptable)  Jupiter FL 33477	BIBAS ASSOCIATES, LLC	2				
The mailing address and street address of the principal office of the Limited Liability Company is:    Principal Office Address:   Mailing Address:	(Must conta	in the words "Limited Liability	Company, "L.L.C.," or "LLC.")			
Jupiter, FL 33477  Jupiter, FL 33477  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:  Frank Bibas, Jr.  Name  660 Bella Vista Court S  Florida street address (P.O. Box NOT acceptable)  Jupiter  FL 33477		treet address of the princip	oal office of the Limited Liability Company is:			
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660 Bella Vista Court S  Florida street address (P.O. Box NOT acceptable)  Jupiter  FL 33477	(The Limited Liability Company business entity with an active F	y cannot serve as its own Regist lorida registration.) street address of the regist Frank Bibas, Jr.	ered Agent. You must designate an individual or another tered agent are:	ARY OF	16 AM	
Florida street address (P.O. Box <u>NOT</u> acceptable)  Jupiter  FL  33477			me			
FL			P.O. Box NOT acceptable)			
City Zip			FL 33477			
		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)

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager	Frank Bibas, Jr.	
	660 Bella Vista Court S.	<del></del>
	Jupiter, FL 33477	
		2022
		2022 HAR TO
·		
		ASSEE, FL
		FE 33
		<del></del>
(Use attachment if necessary)		<del></del>
effective date is listed, the date must b	ne date of filing: (Cope specific and cannot be more than five business	PTIONAL) days prior to or 90 cal
after the date of filing.)		
after the date of filing.)  ICLE VI: Other provisions, if any.		<u> </u>
<b>0</b>		
<b>0</b>		
ICLE VI: Other provisions, if any.	Signature of a member or an authorized representative	
UIRED SIGNATURE:  ccordance with section 605.0205 (3), Florida St t the facts stated herein are true. I am aware that	Signature of a member or an authorized representative atutes, the execution of this document constitutes an affirmation submitted in a document to the Departure felony as provided for in s.817.155, F.S.)	

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)