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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	cument Number)	<u>-</u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

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SECRETARY OF STATE

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W21-160/25



December 20, 2021

IRINA LIE BROWN OAK LLC 1961 RIVER REACH DR. APT. 207 NAPLES, FL 34104

SUBJECT: BROWN OAK LLC Ref. Number: W21000160128

We have received your document for BROWN OAK LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the marked sections in the Articles of Conversion. A signature is missing.

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.

DANIEL L O'KEEFE Regulatory Specialist II

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SECRETARY OF STATE TALLAHASSEF. FLOR

Letter Number: 021A00030618

2022 JAN 3 | AM || : 09

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: Brown Oak, 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.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
December 5, 2018 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Brown Oak, 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.

PILED
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SECRLIARY OF STATE

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Signed this 10th day of December	2021			
Signature of Authorized Representative of Limit	ed Liability Company:			
Signature of Authorized Representative: TYNO Printed Name: Irina Lie	Title: AMBR			
Signature(s) on behalf of Other Business Entity: S	See below for required signature(s)]			
Signature: TYINO UL Printed Name: TYINO LIE	(Title: Authorized member)	Χ		
Signature:Printed Name:	Title:			
Signature:Printed Name:	_Title:			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Incompared to the Chairman of Chairman of Chairman.				
If Florida General Partnership or Limited Liability Signature of one General Partner.				
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:			
All others: Signature of an authorized person.		S: TAL	202	
<u>Fees</u> :		CREI	2022 JAN 3 I	T
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	CRETARY OF STATE LAHASSEE, FLORIDA	131 AM 11:09	LED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -	Nama					
	ne Limited Liabili	ty Company i	is:			
Brown Oak, LLO	^					
DIOWII Oak, LL		rds "Limited Liab	ility Company, "L.L.C.," or "LLC.")		-	
ARTICLE II		ddraec of tha	principal office of the Limited	LLiability (``omn	my ic:
The maning ac	dicss and street a	datess of the	principal office of the Entitle	Liability	Jonnpe	my io.
Principal Offi	<u>ice Address:</u>		Mailing Address:			
1961 River Rea	ich Dr, Apt. 207		1961 River Reach Dr, Apt. 2	20 7		
Naples, FL 341			Naples, FL 34104		_	
· .					_	
The Limited Liabi business entity wi	lity Company cannot set th an active Florida regi	rve as its own Reg stration.)	ed Office, & Registered Ages gistered Agent. You must designate an in c registered agent are:			
	Irina Lie					
		Nai	ne			
	1961 River Ra	each Dr, Apt. 2	207			
			O. Box NOT acceptable)			
	Naples	`	FL ³⁴¹⁰⁴			
		City	Zip			
liability c registered ag statutes rei	company at the plac gent and agree to a lating to the proper	ce designated act in this cape r and complete	I to accept service of process for in this certificate, I hereby acc acity. I further agree to comply e performance of my duties, and registered agent as provided for	ept the appo with the po d I am fami	ointme rovisie liar w	ent as ons of all ith and
	Triv	re he				
	Registere	ed Agent's Si	gnature (REQUIRED)	SECR TALLA	2022 JAN 3	
		(CONTI	NUED)	E IARY HASSE	AN 31	

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	11.2.11.
AMBR	Irina Lie
	1961 River Reach Dr, Apt. 207
	Naples, FL 34104
	<u> </u>
<u> </u>	SEURE JA:
	28
	A.S.
(Use attachment if necessary)	5/5:
`	<u> </u>
	FL'S
LE V: Other provisions, if any.	OF STATE
	<u> </u>
REQUIRED SIGNATURE:	
Trian (i)	n
Tring Us	<u> </u>
	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware t
any false information submitted in a docum	ent to the Department of State constitutes a third degree felo
as provided for in s.817.155, F.S.	•
Tring	
Tun	ed or printed name of signee
Тур	Filing Fees
	Organization and Designation of Registered A

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)