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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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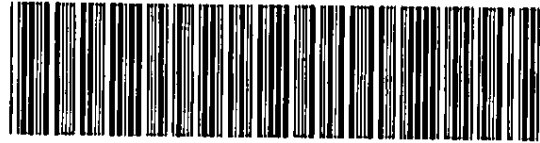
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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*W. J. Peltzer*

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STATE OF MISSISSIPPI

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** BBRamz, LLC  
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

M. Travis Hayes, Esq.  
(Contact Person)

Grant Fridkin Pearson, P.A.  
(Firm/Company)

5551 Ridgewood Drive, Suite 501  
(Address)

Naples, Florida 34108  
(City, State and Zip Code)

thayes@gfpac.com  
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

M. Travis Hayes at (239) 514-1000  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

- \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)
- \$155.00 Filing Fees and Certificate of Status
- \$180.00 Filing Fees and Certified Copy
- \$185.00 Filing Fees, Certified Copy, and Certificate of Status

**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 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:

BBRamz, 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 California  
(Enter state, or if a non-U.S. entity, the name of the country)

on 03/07/2013  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

BBRamz, 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.)**

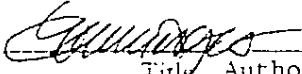
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 27th day of April 2022

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative:   
Printed Name: M. Travis Hayes Title: Authorized Representative

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: \_\_\_\_\_  
Printed Name: William Ramirez Title: Manager

Signature: \_\_\_\_\_  
Printed Name: Maria Bernice Ramirez Title: Manager

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 Officer.  
If Directors or Officers have not been selected, an Incorporator must sign

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability 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)

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**ARTICLES OF ORGANIZATION**

**OF**

**BBRAMZ, LLC**

**ARTICLE I – NAME**

The name of this Limited Liability Company shall be **BBRAMZ, LLC** (the “Company”).

**ARTICLE II – ADDRESS**

The mailing address and street address of the principal office of the Company is:

840 South Collier Boulevard, Unit 504  
Marco Island, Florida 34145

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE,  
& REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the Registered Agent is:

GFPAC Services, LLC  
5551 Ridgewood Drive, Suite 501  
Naples, Florida 34108

Having been named as Registered Agent to accept service of process for this Company at the place designated above, we hereby accept the appointment as Registered Agent and agree to act in this capacity. We further agree to comply with the provisions of all statutes relating to the proper and complete performance of our duties, and we are familiar with and accept the obligations of our positions as Registered Agent as provided for in Chapter 605, F.S.

GFPAC Services, LLC

By: 

BBRAMZ, LLC  
BBRAMZ, LLC  
BBRAMZ, LLC

#### ARTICLE IV – MANAGEMENT

The Company shall be manager-managed by a manager the names and addresses of the initial Managers are:


William Ramirez  
840 South Collier Boulevard, Unit 504  
Marco Island, Florida 34145

Maria Bernice Ramirez  
840 South Collier Boulevard, Unit 504  
Marco Island, Florida 34145

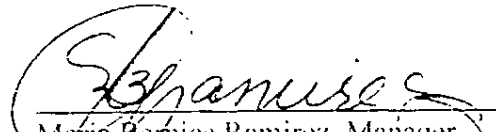
#### ARTICLE V – PURPOSE

The purpose for which this Company is organized is: Any and all lawful business.

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true and that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 87.155, Florida Statutes.



William Ramirez, Manager



Maria Bernice Ramirez, Manager