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(Requestor's Name)	
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PICK-UP WAIT N	IAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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T. SCOTT

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COVER LETTER

TO: New Filing S Division of C					
SUBJECT: Stonecre	est Corner Outparcel LL0	5			
			g Florida Limi	ted Cor	npany)
			~		nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g thi	s matter to:		
Stephen D. Wilson, Es	sq.				
	(Contact Person)			-	
Beggs & Lane, RLLP					
	(Firm/Company)			-	
501 Commendencia S	treet				
	(Address)			-	
Pensacola, FL 32503					
	City, State and Zip Code)			-	
SDW@beggslane.com	1				
E-mail Address: (to b	e used for future annual re	port n	notifications)	-	•
For further information	on concerning this ma	iter,	please call:		
Stephen D. Wilson		_at	(850	202-	3342
(Name of Conta	ct Person)			(Day	rtime Telephone Number)
	or the following amou a bank located in the	•	•	roces.	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Add					t Address:
New Filing Se Division of C					Filing Section ion of Corporations
P.O. Box 632	-				Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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: STONECREST CORNER OUTPARCEL 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
11/30/2006
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Stonecrest Corner Outparcel 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 17th	day of February	_ 20 <u></u>
Signature of Auth	orized Representative of Limi	ted Liability Company:
	orized Representative: 506	to LL 11.1.
Signature of Author	onzed Representative:	W 7 Vacco
Printed Name: Scott	Hallihan	Title: Member/Manager
Signature(s) on be	half of Other Business Entity: [See below for required signature(s)]
Signature:	Sistle	Title: Member/Manager
Printed Name: Scot	t Hallihan	Title: Member/Manager
		•
Signature:		_ Title:
Printed Name:		
Signature:		
Printed Name:		Title:
Signature:		Title:
Printed Name:		
Signature:		
Printed Name:		Title:
Signature:		T'.1
Printed Name:		Title:
If Florida Corpora	ation:	
	man, Vice Chairman, Director, or	Officer.
	cers have not been selected, an Inc	
If Florido Canaral	l Partnership or Limited Liabili	ty Partnershin
	eneral Partner.	
_		
	Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL	General Partners.	
All others:		
Signature of an aut	horized person.	
•		
Fees:		
Articles of	Conversion:	\$25.00
	orida Articles of Organization:	\$125.00
Certified C	-	\$30.00 (Optional)
Certificate	• •	\$5.00 (Optional)
Continuate	O. O	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N The name of the	Name: E Limited Liability Com	pany is:		
STONECREST (CORNER OUTPARCEL L	LC		
	(Must contain the words "Limi		C.," or "LLC.")	
ARTICLE II -	Address:			
		of the principal office	of the Limit	ted Liability Company is:
Principal Offic		Mailing Ac		, , ,
171 Golden Gate	e Pt	171 Golden	Gate Pt	
Unit 3		Unit 3		
Sarasota, FL 342	236	Sarasota, Fl	L 34236	· · · · · · · · · · · · · · · · · · ·
•	an active Florida registration.) ne Florida street address Stephen D. Wilson		nt are:	
		Name		
	501 Commendencia	Street		
	Florida street addr	ess (P.O. Box NOT ac	cceptable)	
	Pensacola	FL 32502	!	
	City		Zip	
liability co registered age statutes rela	mpany at the place designt and agree to act in the ting to the proper and coolingations of my positi Registered Age	gnated in this certificat his capacity. I further a complete performance o	e, I hereby a igree to com if my duties, c as provided	for the above stated limited accept the appointment as ply with the provisions of all and I am familiar with and for in Chapter 605, F.S

A	DT	TOT	F	IV-
-				-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Scott M. Hallihan
	171 Golden Gate Pt, Unit 3
	Sarasota, FL 34236

CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	41/2 /
This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware the ument to the Department of State constitutes a third degree felor
Scott M. Hallihan	
Ty	ped or printed name of signee
•	Filing Fees

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)