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PICK-UP WAIT MAIL
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3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	10/04/2022	4: 1 DW
		Acc#I20160000072	4: () = V
Name:	Kimco Largo	o 139, Inc.	
Document #:			
Order #:	14569719		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
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Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$	180.00	

Thank you!

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: Kimco Largo 139, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
12/11/1992 On
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Kimco Largo 139, 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.
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\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Kimco Eargo 139, LLC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	

ARTICLE II - Address:

ARTICLE I - Name:

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

Principal Office Address:	Mailing Address:		
500 North Broadway, Suite 201	500 North Broadway, Suite 201		
Jericho, New York 11753	Jericho, New York 11753		

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:

C T Corporation System	
Na	me
1200 South Pine Island Road	
Florida street address (P	O. Box NOT acceptable)
Plantation	FI, 33324
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.

By: Muddle Helling Meredith Helling, Assistant Sec.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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		
Sole Member	KRCX Florida Realty, LLC	
	500 North Broadway, Suite 201	•
	Jericho, New York 11753	
		_
		-
CLE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
Jest Some		
Signature of a member or	an authorized representative of a	member
This document is executed in accordance	e with section 605,0203 (1) (b). Florida Statu	ites. I am aware
any false information submitted in a docu	iment to the Department of State constitutes	a third degree fe
as provided for in s.817.155, F.S.		185
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Kathleen M. Gazerro, authorized repres		
Ty	yped or printed name of signee	Ţ
	Filing Fees	
\$125.00 Filing Fee for Articles	of Organization and Designation o	t Registered
\$ 30.00 Certified Copy (Option	nal) S 5.00 Certificate of S	tatus (O ptiĝ
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