# L22000155672

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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

Division of C			
CUDIDOT.	RECOS CO	1	
SUBJECT:		sulting Florida Limited Co	mpany)
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			nd fees are submitted to convert an "accordance with s. 605.1045, F.S.
Please return all corr	respondence concerning	ng this matter to:	
BRETT	(Contagt Person)		
GRECOS 1	(Firm/Company)	by the	
	(Address)	<del></del>	
Key Saice	City, State and Zip Code)	99097	
E-mail Address: (to b	e used for future annual re	eport notifications)	
For further informati	on concerning this ma	tter, please call:	
(Name of Conta	Person)	at ( 106 ) 6- (Area Code) (Day	time Telephone Number)
	for the following amou a bank located in the		sed by this office must be payable in
\$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	☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
11.4 - 212 A 3 1		<b>^</b> .	

# **Mailing Address:**

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahagea, FL 32314

**Street Address:** 

New Filing Section
Division of Corporations
The Centre of Tallahassee

# Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

2022 OCT 21 PM 8: 20 NALLAHASSEE IN TOWN

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the foll-"Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.104 Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conver
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of Manager
(Enter state, or if a non-U.S. entity, the name of the co
on <u>O2-16-2007</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Orga
(Enter Name of Florida Limited Liability Company)
(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 d the date this document is filed by the Florida Department of State.)

5. The plan of conversion has been approved in accordance with all applicable statutes.

document's effective date on the Department of State's records.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the a which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste

Signed this day of	_20 <u></u>	
Signature of Authorized Representative of Limit		
Signature of Authorized Representative Printed Name: MEST H. SECO	Title: 1/Box Mark	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
	. 3 (7,	
Signature:	Title	
Printed Name.	_ Title:	
Signature:		
Printed Name:	Title:	
Signature: Printed Name:	Tist	
rimed Name.	1 Itte:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:		
Signature:		
Printed Name:	Title:	
If Florida Corporation:	OPT .	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.		
if Directors of Officers have not been selected, an in-	orporator must sign.	
If Florida General Partnership or Limited Liabili	ty Partnership:	
Signature of one General Partner.		
7677 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15	. *	
If Florida Limited Partnership or Limited Liabilic Signatures of ALL General Partners.	y Limited Partnership:	
Signatures of ALL General Lattiers.		
All others:	202	
Signature of an authorized person.	200	
P	2022 OCT 21	<u>.</u> .
Fees:		
Articles of Conversion:	\$25.00	
Fees for Florida Articles of Organization:	\$125.00 SF &	•
Certified Copy:	\$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

4	77.7	3/17	T. 7	\	
4	$\mathbf{H}$	16.5	. 10. 1	- N. C	1117

The name of the Limited Lichillay Company is:

Most contain the words. Limited Children's Complete, the Letter of the Letter

## ARTICLE II - Address:

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

Triscipal Office Address:

Mailing Address:

ARTICLE III - Registered Agent, Registered Office. & Registered Agent's Signature: The Emilia traffic tempory cannot some as a some Registered James for more designate an ordinated or more than their entry with an active Plance regent them.

The name and the Florida wreet address of the registered agent are.

WAYNE ANDERSEN

28552 CLINTON LANE
Florida sureel address (P.O. Box NOT acceptable)

BOUTTA SPRINGS PL 39139

Hereitig been not vol as registered agent and to accept service of process jurche above stated italied liability company at the place designated in this certificate. Thereby a scept the appointment as registered agent and agree to not in this enpactry. I further agree to compressible the provisions of all statutes elating to the proper and complete performance of my duties, and Leavyanni let with and accept the obligations of my position as registered agent as provided for in Chapter 8-15. F.S.

Calistonia Agont a Signature (REQUIRED)

(CONTINUED)

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### **ARTICLE IV-**

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	THETT HE CREW CATCOS ON THE FAY LLC TOURF DE KEY LAKED, FLURIDA SINO
<del></del>	
<del></del>	
(Use attachment if necessary)	9022 OCT
TCLE V: Other provisions, if any.	21 PM S
	8: <u>20</u>

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Age \$ 30.00 Certified Conv (Ontional) \$ 5.00 Certificate of Status (Ontional)