# 122000459122

| (Requestor's Name)   |
|--|
| (Address)  |
| (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: |
| (City/State/Zip/Phone #)   |
| (=), =   |
| (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  ertified Copies Certificates of Status  Special Instructions to Filing Officer:  |
| (Business Entity Name)   |
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| (Document Number)  |
| Certified Copies Certificates of Status  |
| Special Instructions to Filing Officer:  |
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### **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:

Nautico LLC

|          | (Enter Name of Other Business Entity)   |   |
|----------|---|---|
| 2.       | The "Other Business Entity" is a Limited Liability Comp   | any   |
|          | (Enter entity type. Example: corporation, limited partnership, g  | general partnership, common law or business trust, etc. |
| Fi       | irst organized, formed or incorporated under the laws of  | California  |
|          | (Enter state,   | or if a non-U.S. entity, the name of the country)       |
| or       | 10 / 18 / 2019  |   |
| O.       | (date of organization, formation or incorporation)  |   |
| 3.       | The name of the Florida Limited Liability Company as set fort   | th in the attached Articles of Organization:            |
|          | Nautico LLC   | · · · · · · · · · · · · · · · · · · ·                   |
|          | (Enter Name of Florida Limited Liability Compar   | ny)   |
| 4.       | If not effective on the date of filing, enter the effective date:   | 05 / 04 / 2022  |
| th<br>No | If not effective on the date of filing, enter the effective date:   | State.)   |
| 5.       | The plan of conversion has been approved in accordance with a   | ıll applicable statutes.                                |
| 6.       | The "Converted or Other Business Entity" has agreed to pay any r which such members are entitled under ss. 605.1006 and 605.106 |   |

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| Signed this 26 day of October  | 20 22                                 |  |  |  |  |  |  |
|--|---------------------------------------|--|--|--|--|--|--|
| Signature of Authorized Representative of Lim  |                                       |  |  |  |  |  |  |
| Signature of Authorized Representative:  | Title:Owner                           |  |  |  |  |  |  |
| Signature(s) on behalf of Other Business Entity:   | [See below for required signature(s)] |  |  |  |  |  |  |
| Simony Ophilotoy   |                                       |  |  |  |  |  |  |
| Signature: John Heeg John Heeg   | Title: Owner                          |  |  |  |  |  |  |
|  |                                       |  |  |  |  |  |  |
| Signature:Printed Name:  | Tiele                                 |  |  |  |  |  |  |
| Printed Name:  | Title:                                |  |  |  |  |  |  |
| Signature:   |                                       |  |  |  |  |  |  |
| Signature:Printed Name:  | Title:                                |  |  |  |  |  |  |
| Signatura  |                                       |  |  |  |  |  |  |
| Signature:Printed Name:  | Title:                                |  |  |  |  |  |  |
|  |                                       |  |  |  |  |  |  |
| Signature: Printed Name:   | m: i                                  |  |  |  |  |  |  |
| Printed Name:  | I tile:                               |  |  |  |  |  |  |
| Signature:   |                                       |  |  |  |  |  |  |
| Signature:Printed Name:  | Title:                                |  |  |  |  |  |  |
|  |                                       |  |  |  |  |  |  |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or                                   | Officer                               |  |  |  |  |  |  |
| If Directors or Officers have not been selected, an In-  |                                       |  |  |  |  |  |  |
|  | •                                     |  |  |  |  |  |  |
| If Florida General Partnership or Limited Liabili  | ty 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 FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limited Liability Company   | y is:  |   |  |
|---|--|---|--|
| Nautico Ll  | _C   |   |  |
| (Must contain the words "Limited Li   | ability Company, "                                       | L.L.C.," or "L.LC.")  |  |
| ARTICLE II - Address: The mailing address and street address of the   | ne principal off   | ice of the Limite   | d Liability Company is:  |
| Principal Office Address:   | Mailing  | Address:  |  |
| 489 1st Ave S   |  | 489 1st Ave S   |  |
| Naples, Florida 34102   | N  | aples, Florida 34102  |  |
| <del></del>   | the registered a<br>thn Heeg<br>Jame                     | agent are:  |  |
| 489   | 1st Ave S  |   |  |
| Florida street address (  | P.O. Box NO  | [ acceptable)   |  |
| Naples  | FL_  | 34102   |  |
| City  |  | Zip   |  |
| Having been named as registered agent an liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and complaceept the obligations of my position as | ed in this certif<br>apacity. I furth<br>lete performand | icate, I hereby acc<br>er agree to compl<br>ee of my duties, ar | cept the appointment as<br>ly with the provisions of al<br>nd I am familiar with and |
| John  | alday  |   |  |
| Registered Agent's  | Signature (RE  | QUIRED)   | 2027<br>SE1  |
| (CON  | ΓINUED)  |   | DIZZ MAY - U<br>SECRETAR<br>TALLAH   |

#### ARTICLE IV-

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

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address:  |                  |
|--|--|------------------|
| "MGR" = Manager  MGR                     | John Heeg  |                  |
| WIGH                                     | 489 1st Ave S  |                  |
|  | Naples, Florida 34102  |                  |
|  | - Trapido, Fibrida o Froz  | <del></del>      |
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|  | <u>۾                                    </u>   |                  |
| CLE V: Other provisions, if any.         | ₽5   | 1 1              |
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| REQUIRED SIGNATURE:                      | 75   | <del>-</del>     |
| REQUIRED SIGNATURE.                      | 0.111  | 7 N              |
|  | ym day   |                  |
|  | 7  |                  |
| This document is executed in accordance  | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awarment to the Department of State constitutes a third degree  | e that<br>felony |
| as provided for in s.817.155, F.S.       | ment to the 5-phillips of 5-bit 400-bit 100-bit 100-bi | ** /             |
| •  |  |                  |

Typed or printed name of signee

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)