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Special Instructions to Filing Officer:	2022 1:3: -4 AVII: 11	

# **CT CORP**

## 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date:

11/04/2022

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Acc#I2016000072

Name:	Kimco Coral Springs 623, Inc.
Document #:	
Order #:	14620244

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	Amount: \$ 180.00
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	Thank you!

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	22 W	ISIAI3
Articles of Conversion	NON	955 955
For	<u>۲</u>	
"Other Business Entity"	- <del></del> -1	- <u>``</u> , <u>`</u> <u>m</u>
Into	PH	- 10 44 C
Florida Limited Liability Company	÷.	
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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: Kimeo Coral Springs 623, Inc.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a <u>corporation</u>

(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of

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

11/08/1994 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:

Kimeo Coral Springs 623, LLC

(Enter Name of Florida Limited Liability Company)

Upon filing

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 1st day of November	_ 20_22
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative:	Person Title: Authorized Person
Signature(s) on behalf of Other Business Entity: [	
Signature: <u>FAL Rome</u> Printed Name: Kathleen Wazerro	Title: Assistant Secretary
Signature: Printed Name:	
Printed Name:	Title:
Signature:	
Signature:	
Signature:Printed Name:	_ Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or 6 If Directors or Officers have not been selected, an Inc If Florida General Partnership or Limited Liability Signature of one General Partner.	corporator must sign.
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
<u>All others:</u> Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE 1 - Name:**

The name of the Limited Liability Company is:

Kimco Coral Springs 623, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### ARTICLE II - Address:

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:

 <u>CT Corporation System</u>

 Name

 1200 South Pine Island Road

 Florida street address (P.O. Box NOT acceptable)

 Plantation

City

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. Thereby 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..

Zip

C T Corporation System

By: Valmue Service

Registered Agent's Signature (REQUIRED)

(CONTINUED)

#### ARTICLE IV-

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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 AMBR	KRCX Florida Realty, LLC	22 h
	500 North Broadway, Suite 201	SECHE VISION
	Jericho, New York 11753	
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(Use attachment if necessary)		

ARTICLE V: Other provisions, if any.

#### **REQUIRED SIGNATURE:**

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.

Kathleen M. Gazerro, authorized representative

Typed or printed name of signee

Filing Fees

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)