# L22000483927

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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S. CHATHAM

DIVISION OF CORPORATIONS

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# **COVER LETTER**

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TO:	New Filing S Division of C					
SHR	IFCT: WPE IN	VESTMENT #10, L.L.C.				
301).	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Name of Re	sulting	Florida Lim	ited Con	npany)
						d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concernin	g this	s matter to:		
HOW	ARD J POWERS	S 11				
	,	(Contact Person)			_	
WEIT	ZMAN & POWE	RS, LTD.				
		(Firm/Company)			_	
2900	W BAY TO BAY	BLVD., UNIT 1003				
		(Address)			_	
TAM	PA, FL 33629					
	(	City, State and Zip Code)			_	
hpow	ers@weitzmanpo	owers.com				
E-1	mail Address: (to b	oe used for future annual re	port n	otitications)	_	
For fi	arther informati	on concerning this ma	tter. j	olease call:		
HOW	ARD J POWERS	S 11	at (	312	չ 296-	5902
	(Name of Conta	act Person)	(	(Area Code	) (Day	time Telephone Number)
		or the following amou a bank located in the			process	sed by this office must be payable in US
(\$25 fe & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status		180.00 Filing Certified Co		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7			New I Divisi The C	Address: Filing Section on of Corporations fentre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

		ACCC	OUNT NO.	:	12000000195
		RE	EFERENCE	:	133722 7395719
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PLEASE I	RETURN	THE FOLLO	WING AS	PROC	OF OF FILING:
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EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland -- EXT#

# Articles of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

FILED SECRETARY OF STATE DIVISION OF CORPORATION 22 NOV 15 AM 1: 22

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: WPE INVESTMENT #10, L.L.C.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(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)
NOVEMBER 9, 2020
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
WPE INVESTMENT #10, L.L.C.
(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.)
<u>Note:</u> 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 14th day of November	_ 20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Howard Printed Name: HOWARD J POWERS II	1 Powers II _ Title: MANAGER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Howard Powers II Printed Name: HOWARD J POWERS II	Title: MANAGER
Signature:	
Printed Name:	_ Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Tists
Printed Name:	_ Title:
Signature:Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liabilit	orporator must sign.
Signature of one General Partner.	<u>, , , , , , , , , , , , , , , , , , , </u>
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE 1 - Name:** 

The name of the Limited Liability Company is:

MOS INVESTMENT HAS A LO	Type text here	
WPE INVESTMENT #10, L.L.C. (Must contain the words "Lin	nited Liability Company, "L.L.C" or "LLC.")	
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Compan	y is:
Principal Office Address:	Mailing Address:	
2900 W BAY TO BAY BLVD. UNIT 1003 TAMPA, FL 33629	2900 W BAY TO BAY BLVD. UNIT 1003 TAMPA, FL 33629	
	ss of the registered agent are:	SECRE) DIVISION (
HOWARD J POWE	RS II	25 F CS
	Name	지유 구 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
2900 W BAY TO BA	Y BLVD., UNIT 1003	81A 1873
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	350
TAMPA	FL <sup>33629</sup>	
City		
liability company at the place des registered agent and agree to act in t statutes relating to the proper and o accept the obligations of my posit Admid (la	ignated in this certificate, I hereby accept the above stated lignated in this certificate, I hereby accept the appointment his capacity. I further agree to comply with the provision complete performance of my duties, and I am familiar with ion as registered agent as provided for in Chapter 605. Fixed the second of the provided for the chapter 605 of the content of the provided for the chapter 605 of the content of the provided for the chapter 605 of the content of the provided for the chapter 605 of the content of the chapter 605 of the c	t as s of all i and

(CONTINUED)

### ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	HOWARD J POWERS II		
	2900 W BAY TO BAY BLVD., UNIT 1003	<u>_</u>	
	TAMPA, FL 33629		
MGR	ARDEN S WEITZMAN		
<del></del>	2900 W BAY TO BAY BLVD., UNIT 1003	<del></del>	
	TAMPA, FL 33629		
	·		
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		_ <del>_</del>	
(Use attachment if necessary)		N	<u>U</u>
		2	<u>&lt;                                    </u>
ICLE V. Orban annulation of famous		22 NOV 15	Ģ:
ICLE V: Other provisions, if any.		_	5.5
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· · ·		<u> </u>	<u> - 항호</u>
	<del>.</del>		-9,,
REQUIRED SIGNATURE:		Ň	
<del></del>		~	SNC
Howard / Powers I			

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.

HOWARD J POWERS II, Authorized Representative of Member

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)