## L22000485378

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Na	me)
(D	ocument Number)	)
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer.	
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<u>.                                    </u>	<del></del>	

Office Use Only



000397347100

S. CHATHAN

2022 No. -9 PS 4:27

### **COVER LETTER**

	lew Filing Se Pivision of C					
SUBJEC	T: Bearston	e Vacations, LLC				
505,150		(Name of Res	ulting Florida Li	mited Coi	mpany)	
			_		nd fees are submitted to convert a accordance with s. 605.1045, F.S.	n "Other
Please re	turn all corre	espondence concernin	g this matter to	<b>)</b> :		
Jed R. Ha	ayden					(0)
-		(Contact Person)				_
Hayden C	Grant PLLC					:: ;. 
		(Firm/Company)				<u>ت</u> : ا
214 S 8th	St, Ste 301					
		(Address)				
Louisville	, KY 40202					
	•	City, State and Zip Code)				
	den-grant.com		. <u>.</u>			
E-mail	Address: (to be	e used for future annual re	port notifications	)		
For furth	er informatio	on concerning this ma	tter, please cal	1:		
Jed R. Ha	ayden		_at (	<sub>)</sub> 638-	-2817	
(1	Name of Conta	ct Person)	(Агеа Со	de) (Da	ytime Telephone Number)	
		or the following amou a bank located in the	•	•	sed by this office must be payable	e in US
\$150.00 (\$25 for Co & \$125 for of Organiz	- Articles	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fill and Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
N D P	lailing Addr few Filing Se vivision of Co O. Box 632 allahassee, F	ection orporations 7		New Divis The (	et Address: Filing Section Sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2022

CORPORATION SERVICE COMPANY

SUBJECT: BEARSTONE VACATIONS, LLC

Ref. Number: W22000141936



We have received your document for BEARSTONE VACATIONS, LLC. However, the document has not been filed and is being returned for the following:

The conversion needs the date that business entity was original first formed and organized.,

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 322A00025227

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 125240 AUTHORIZATION COST LIMIT ORDER DATE: November 9, 2022 ORDER TIME : 1:24 PM ORDER NO. : 125240-005 CUSTOMER NO: 8387619 DOMESTIC AMENDMENT FILING NAME: BEARSTONE VACATIONS, LLC EFFECTIVE DATE: XX ARTICLES OF CONVERSION AND ARTICLES OF ORGANIZATION \_ RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY \_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER'S INITIALS:

### **COVER LETTER**

TO: New Filing So Division of Co				
SUBJECT: Bearston	•			
SOBJECT.	(Name of Re	sulting Florida Limi	ted Con	npany)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
Jed R. Hayden				
·	(Contact Person)		-	
Hayden Grant PLLC				
	(Firm/Company)	-	-	
214 S 8th St, Ste 301				
	(Address)		-	
Louisville, KY 40202				
	City, State and Zip Code)		-	
jed@hayden-grant.con	•			
	e used for future annual re	port notifications)	-	
		-		
For further information	on concerning this ma	tter, please call:		
Jed R. Hayden		at ( <sup>502</sup>	) 638-2	2817
(Name of Conta	ct Person)	(Area Code	(Day	time Telephone Number)
Enclosed is a check for dollars and drawn on	_		rocess	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Addı	ess:		Street	Address:
New Filing Se	ection		New I	Filing Section
Division of Co				on of Corporations
P.O. Box 632	<i>l</i>		The C	entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# 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:  Bearstone Vacations, LLC
(Enter Name of Other Business Entity)
The "Other Business Entity" is a Kentucky limited liability company
(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)
on(date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Bearstone Vacations, 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.

uSign Envelope ID: FEBA5E29-943A-4D86-A1FC-19FB84197BFE		
Signed this day of November	20	
Signature of Authorized Representative of Lim	<del>-</del>	
Signature of Authorized Representative: Printed Name: Shane Harstine	Title: Manager	
Signature(s) on hobal for Other Business Entity:	[See below for required signature(s)]	
Signature: Share Harstine		
Signature: Shane Harstine Printed Name: Shane Harstine	Title: Manager	
Signature:Printed Name:	Tisla	
		_
Signature:		7.3
Signature:Printed Name:	Title:	1
		1
Signature:Printed Name:	Title	S
		33
Signature:Printed Name:		
Printed Name:	Title:	<b>-</b>
Signature:		
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In- If Florida General Partnership or Limited Liabili Signature of one General Partner.	corporator must sign.	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty 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 I - Name: The name of the Limited Liability Company is:		
Bearstone Vacations, LLC		
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
2028 S. Highway 53, Suite 3318	2028 S. Highway 53, Suite 3318	
LaGrange, KY 40031	LaGrange, KY 40031	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration.	red Agent. You must designate an individual or another	
Corporation Service Company		
Name		
1201 Hays Street Florida street address (P.O.	Box NOT acceptable)	
Tallahassee	FL <sup>32301</sup>	
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..

Ulxins Weibrel, assistent ver present Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

<u>Γitle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
Manager	Shane Harstine
	2028 S. Highway 53, Suite 3318 LaGrange, KY 40031
	LaGrange, K1 40001
<del></del>	
Use attachment if necessary)	
Ose attachment if necessary)	
LE V: Other provisions, if any.	
2E T. Offici provisions, it driv.	
22 V. Other provisions, it any.	
The victorial provisions, it any.	
22 V. Other provisions, it any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am awar
Signature of a member or	with section 605.0203 (1) (b), Florida Statutes. I am awar
Signature of a member or This document is executed in accordance any false information submitted in a docu	with section 605.0203 (1) (b), Florida Statutes. I am awar
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S. Shane Harstine	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awar ment to the Department of State constitutes a third degree ped or printed name of signee  Filing Fees

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