122000530018

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





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12/16/22--01005--012 **180.00

SECRETARY OF STATE FALL AHASSEE, IT ONE

FILED

COVER LETTER

Division of C	orporations					
SUBJECT: TF Span	ish Cove Class C LLC					
30b/I/C1.		ulting Florida Limi	ted Con	ipany)		
				d fees are submitted to co coordance with s. 605.104		
Please return all corre	espondence concernin	g this matter to:				
Paula Barnett						
	(Contact Person)	· · · · · · · · · · · · · · · · · · ·	_			
Pino Nicholson PLLC						
	(Firm/Company)		_			
99 S. New York Ave.						
	(Address)		_			
Winter Park, FL 32789	9					
((City, State and Zip Code)		_			
pbarnett@pinonichols	onlaw.com		_			
E-mail Address: (to b	e used for future annual re	port notifications)				
For further informati	on concerning this ma	tter, please call:			22 SEI FALL	
Paula Barnett		at (⁴⁰⁷	425-	7831 ext. 108		7
(Name of Conta	et Person)		(Day	rtime Telephone Number)	22 DEC 16 SECRETARY	F
	or the following amou a bank located in the		proces	sed by this office must be	<u>ud</u> €	
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	■\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	0 3	
Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 17		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassec N. Monroe Street, Suite 8	310	

Tallahassee, FL 32303

TO: New Filing Section

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 TF Spanish Cove Class C LLC	of Conv	ersio)	n is:
(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 limited partnership.	law or bus	iness t	rust, etc.
First organized, formed or incorporated under the laws of			
(Enter state, or if a non-U.S. entity, the na	ime of the	countr	ry)
March 9, 2022 on .			
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Article	es of Or	ganiz	ation:
TF Spanish Cove Class C LLC	SE BALL	22	
(Enter Name of Florida Limited Liability Company)	CREST	030	
4. If not effective on the date of filing, enter the effective date:	SS:	2	-
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 c	calle <u>n</u> dar	r <u>⊭d</u> ay	s stildr
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 we document's effective date on the Department of State's records.	Higher Higher Higher	H LESO 3	as the

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

Signature of Authorized Representative:	Mikhail Blotnik
Printed Name: Mikhail Zlotnik	Title: President of Manager
Signature(s) on hehalf of Other Business Enti Mikhail Blotnik	tv: [See below for required signature(s)]
Printed Name: Mikhail Zlotnik	Title: President of Manager
Signature:	TO L
Printed Name:	Inde:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Limi		any is:						
TF Spanish Cove Clas	s C LLC							
(Must c	ontain the words "Limited	Liability Company, "L.L.C.," or "LLC.")						
ARTICLE II - Addr The mailing address a		the principal office of the Limited	I Liability Company is:					
Principal Office Add	dress:	Mailing Address:						
99 S. New York Ave.		P.O. Box 1750	P.O. Box 1750					
Winter Park, FL 32789		Winter Park, FL 32790	Winter Park, FL 32790					
(The Limited Liability Computations entity with an acti	oany cannot serve as its ow ve Florida registration.)	istered Office, & Registered Age on Registered Agent. You must designate an in of the registered agent are:						
<u>L</u>	aurence J. Pino. P.A.		75 N					
		Name	ECRET LLAHY					
9	9 S. New York Ave.		C 16 C 16 RASS					
ī	Florida street addres	s (P.O. Box NOT acceptable)						
W	inter Park	32789						

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..

Zip

Begistered Agent's Signature (REQUIRED)

City

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	1.	1	•			_

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	TF MGMT CORP	
	99 S. New York Ave.	
	Winter Park, FL 32789	<u> </u>
		-
		
(Use attachment if necessary)		
(
		SE SE
LE V: Other provisions, if any.		DEC CREI CAH
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		158.84 158.84 10 10 10 10 10 10 10 10 10 10 10 10 10 1
		Co 2
REQUIRED SIGNATURE:		01 STATE
REQUIRED SIGNATURE:	Jedzi ci na ve sa unici ina nek nek men	25 5
	Mikhail Zlotnik	· · · · · ·

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.

Mikhail Zlotnik

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)

COVER LETTER

TO: New Filing So Division of C							
SUBJECT: TF Span	•						
SUBJECT:	(Name of Res	sulting Florida Limit	ed Company)				
	s of Conversion, Artic a "Florida Limited L					r	
Please return all corre	espondence concernin	g this matter to:					
Paula Barnett							
	(Contact Person)						
Pino Nicholson PLLC							
	(Firm Company)						
99 S. New York Ave.							
	(Address)						
Winter Park, FL 32789	a						
	City, State and Zip Code)				7A. S. S.		
pbarnett@pinonicholsc	•				22 DEC 16 AM 10: 03 SECRETARY OF STATE ALLAHASSEE, FROM	\Box	
<u> </u>	e used for future annual re	nort notifications)			30 C	ILED	
		•			55.55 5.55 5.55 5.55 5.55	,	
For further information	on concerning this ma	tter, please call:			지구 풀	;	
Paula Barnett		ลเ (407	,425-7831 e:	xt. 108	- <u> </u>		
(Name of Conta	ict Person)	(Area Code)	(Daytime Te	dephone Number)			
	or the following amou a bank located in the		rocessed by	this office must	be payable in US		
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□S155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Cop	y Certit	85.00 Filing Fees, fied Copy, and ficate of Status			
Mailing Add	ress:		Street Addr	ress:			
New Filing Section			New Filing				
Division of C	-			Corporations			
P.O. Box 6327			The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314