L22000534858

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

Office Use Only



700398333587

S. CHATHAM

2022 DI 27 F3 F:27

COVER LETTER

TO: New Find Division	_	ection orporations				
		uest Services. LLC				
SUBJECT		(Name of Res	ulting	, Florida Limite	d Con	npany)
				_		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return a	ill corre	spondence concerning	g this	s matter to:		
Rebecca DiSte	fano					
		(Contact Person)				
Greenberg Train	urig, P.A	۸.				
		(Firm/Company)				
401 East Las C	las Bou	levard, Suite 2000				
		(Address)				
Fort Lauderdale	e. FL 33	301				
		City, State and Zip Code)				
distefanor@gtla		, , , , , , , , , , , , , , , , , , , ,				
		e used for future annual rep	ort n	otifications)		
Dan Camban in C	·		•	بالمد يدييا		
		on concerning this mat	tci,	piease cair.		
Rebecca DiSte	fano		_at (954	768-8)	
(Name o	of Conta	ct Person)		(Area Code)	(Day	time Telephone Number)
		or the following amou a bank located in the U		•	rocess	sed by this office must be payable in US
S150.00 Filing (\$25 for Convers & \$125 for Article of Organization)	ion	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing Certified Cop		☐\$185.00 Filing Fees. Certified Copy. and Certificate of Status
New F Divisio	g Addi iling Se on of Co ox 632	ection orporations			New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

CT CORP

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

12/27/2022

Date:

		Acc#I20160000072	4. C > 3 V
Name:	Florida Gues	st Services, Inc.	
Document #:			
Order #:	14695352 -1	***	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🚺	Certified: Plain: COGS:	✓	Email Address for Annual Report Notifications:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$	180.00	

Thank you!

DocuSign Envelope ID: 36ECB1A9-39AB-4852-BF54-35AE389C26E1

22 DEC 27 FB11: 15

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: Florida Guest Services, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation (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)
March 27, 2017
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Florida Guest Services, 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.

\$25.00

\$125.00

\$30.00 (Optional)

Fees:

Articles of Conversion:

Fees for Florida Articles of Organization:

Certified Conv.

	ANIZATION FOI	R FLORIDA LIMITED LI	ABILITY COMPANY
ARTICLE I - Name:	d Linkillan Commun	:	
The name of the Limited	a Liability Compan	iy is:	
Florida Guest Services, L	I.C.		
		dability Company, "L.L.C.," or "LLC."	')
ARTICLE II - Addres	s:		
		he principal office of the Lim	ited Liability Company is:
Principal Office Addre	<u>ess:</u>	Mailing Address:	
6400 N Andrews Ave, #34	40	6400 N Andrews Ave, #	340
Fort Lauderdale, FL 3330	9	Fort Lauderdale, FL 333	109
(The Limited Liability Compan business entity with an active l	y cannot serve as its own Florida registration.)	tered Office, & Registered A Registered Agent. You must designate	Agent's Signature: (3)
The name and the Florid	da street address of	the registered agent are:	· 1 - 2
ст	Corporation System		
	ì	Vame	
120	0 South Pine Island F	Road	, ·
Flo	orida street address	(P.O. Box NOT acceptable)	
Plan	itation	FL 33324	
	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..

David Westcott, Assistant Secretary David Westcott CT Corporation System

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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				
AMBR	PMC Everglade, LLC			
	6400 N Andrews Ave, #340			
	Fort Lauderdale, Florida 33309			
				
(Use attachment if necessary)				
•	_			
	C			
CLE V: Other provisions, if any.				
M. Sheehan shall serve as President and	CEO of Florida Guest Services, LLC.			
	<u> </u>			
REQUIRED SIGNATURE:				
Fevir Sheehan				
Ciana Annua a Carana an Indiana	an and animal management stick of a manch of			
	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware tha			
any false information submitted in a docu	iment to the Department of State constitutes a third degree felon			
as provided for in s.817.155, F.S.				
Kevin M. Sheehan				
	ped or printed name of signee			

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)