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(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	04/86/2201829018 +*129.00
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	1-11 1-12 2022 JUH - 8 AM 8:44 141 2002 State 2010
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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 6, 2022

DEBRA KAMERMAN SILVERMAN REALTY GROUP, INC. 237 MAMARONECK AVENUE WHITE PLAINS, NY 10605

SUBJECT: TWO SHAW'S COVE LLC Ref. Number: W22000059278

We have received your document for TWO SHAW'S COVE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the marked sections in the Articles of Conversion. A signature is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 222A00010541

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COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: ____ Two Shaw's Cove LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Debra Kamerman

(Contact Person)

Silverman Realty Group, Inc.

(Firm/Company)

237 Mamaroneck Avenue

(Address)

White Plains, New York 10605

(City, State and Zip Code)

debrak@silvermanrealty.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Debra Kamerman	at (⁹¹⁴	683-8000
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status

Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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Articles of Conversion For <u>"Other Business Entity"</u> 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: Two Shaw's Cove LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a ______

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

First organized, formed or incorporated under the laws of Connecticut

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

February 5, 1996 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:

Two Shaw's Cove 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.)

<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.

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Signed this 5 ⁴⁰ day of April	20_27	
Signature of Authorized Representative of Lim	nited Liability Company:	
Signature of Authorized Representative:	1. Alera Title: Authorized Member	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: <u>All hlern</u> Printed Name: <u>Jik Gve.enspan</u>	X Title:	
Signature: Printed Name:		
Signature: Printed Name:	Title:	
Signature: Printed Name:	Title:	
Signature: Printed Name:		
Signature: Printed Name:	Title:	
If Florida Corporation: Signature of Chairman. Vice Chairman. Director, or If Directors or Officers have not been selected, an Ir		
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ity Partnership:	
If Florida Limited Partnership or Limited Liabil Signatures of <u>ALL</u> General Partners.	ity Limited Partnership:	N LLX
<u>All others:</u> Signature of an authorized person.		ALT AN ASSI OF THE
<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 I - Name:

The name of the Limited Liability Company is:

Two Shaw's Cove, 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:	

237 Mamaroneck Avenue White Plains, New York 10605

Mailing Address:

237 Mamaroneck Avenue ______ White Plains, New York 10605

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:

Adam Silverman		
Name		
9300 Biaggio Road		
Florida street address (P.O. Box <u>NOT</u> acceptable)		
Boca Raton	FL ³³⁴⁹⁶	
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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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	Leon Silverman			
	237 Mamaroneck Avenue			
	White Plains, New York 10605			
AMBR	Bonnie Silverman			
	237 Mamaroneck Avenue			
	White Plains, New York 10605		_	
AMBR	Jill Greenspan			
	237 Mamaroneck Avenue		—	
	White Plains, New York 10605			
			_	
			_	
(Use attachment if necessary)			NDF 2202 ¹	
(one unionment if hereistig)			4UL	
		<u> (3 :</u>	1	
ICLE V: Other provisions, if any.			æ	, [] :
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REQUIRED SIGNATURE:

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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.

Jill Greenspan

ART

Typed or printed name of signeeFiling 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)



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Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: March 30, 2022

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.

A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

Business Details

Business Name	TWO SHAW'S COVE LLC	
Business ALEI	US-CT.BER:0530419	
Formation Date	02/05/1996	

in Sthenk

Secretary of the State