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

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01/0 No 0011/4-620 **100/01



COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: AMBER ACRES, LLC			
(Name of Res	ulting Florida Lim	imited Company)	
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lie Please return all correspondence concerning	ability Compan		ег
Trease retain an correspondence concerning	,	.	
JUSTIN J. KLATSKY, ESQ.			
(Contact Person)			
VALRICO LAW GROUP, PLLC			
(Firm/Company)			
3626 ERINDALE DRIVE			
(Address)			
VALRICO, FL 33596			
(City, State and Zip Code)			
amber@soukkala.com			
E-mail Address: (to be used for future annual rep	port notifications)	<u> </u>	
For further information concerning this mat	ter, please call:	II:	
JUSTIN KLATSKY	_at (813	₎ 661-5185	
(Name of Contact Person)	ode) (Daytime Telephone Number)		
Enclosed is a check for the following amou dollars and drawn on a bank located in the U		es processed by this office must be payable in US	5
\$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 Co		
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

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 of Conversion is: AMBER ACRES, 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
(Enter state, or if a non-U.S. entity, the name of the country)
December 3, 2021 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:
AMBER ACRES, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: January 1, 2023
(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.

Signed this 23rd day of December	20 22
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative: Printed Name: AMBER SOUKKALA	Title: Manager
Signature(s) on behalf of Other Business Entity: [3	
Signature: Printed Name: AMBER SOUKKALA	
Printed Name: AMBER SOUKKALA	Title: Sole Member
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Timed Ivanio.	
Signature:Printed Name:	Title
Printed Name:	_ Title.
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> 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 - Na The name of the I	ame: Limited Liability Company	is:
AMBER ACRES, L	LC	
		bility Company, "L.L.C.," or "LLC.")
ARTICLE II - A The mailing addre		e principal office of the Limited Liability Company
Principal Office	Address:	Mailing Address:
100 S. ASHLEY D		100 S. ASHLEY DRIVE SUITE 600
TAMPA, FLORIDA	33602	TAMPA, FLORIDA 33602
ADTICLEU	Desistand Agent Desists	
(The Limited Liability business entity with a	Company cannot serve as its own R nactive Florida registration.) Florida street address of t	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:
(The Limited Liability business entity with a	Company cannot serve as its own R nactive Florida registration.) Florida street address of t JUSTIN J. KLATSKY, ESC	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:
(The Limited Liability business entity with a	Company cannot serve as its own R nactive Florida registration.) Florida street address of t JUSTIN J. KLATSKY, ESC N 3626 ERINDALE DRIVE	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:
(The Limited Liability business entity with a	Company cannot serve as its own R n active Florida registration.) Florida street address of t JUSTIN J. KLATSKY, ESC N 3626 ERINDALE DRIVE Florida street address (ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are: ame P.O. Box NOT acceptable)
(The Limited Liability business entity with a	Company cannot serve as its own R nactive Florida registration.) Florida street address of t JUSTIN J. KLATSKY, ESC N 3626 ERINDALE DRIVE	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:

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)

Α	R	TI	C	$\mathbf{L}\mathbf{E}$	Ι	V	_
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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	
MGR	AMBER SOUKKALA
	100 S. ASHLEY DRIVE SUITE 600
	TAMPA, FLORIDA 33602
	2023
	<u> </u>
	- I
	751
	A A
(III	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
JEE V. Other provisions, it any.	
REQUIRED SIGNATURE:	
MBQ OT MAN AND AND AND AND AND AND AND AND AND A	
1 0 0	\mathcal{N}
Signature of a member or	an authorized representative of a member
Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware t
This document is executed in accordance any false information submitted in a document	with section 605.0203 (1) (b), Florida Statutes. I am aware t
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware t nent to the Department of State constitutes a third degree fel

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)