L23000668775

(Requ	uestor's Name)	
(Áddr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busi	ness Entity Name)	
(Docs	ument Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fi		

Office Use Only



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COVER LETTER

Division of C	orporations			
SUBJECT: Kamping	Adventures, LLC			
		oulting Florida Lin	nited Cor	mpany)
				nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to	:	
Troy D. Parker, Esq.				
	(Contact Person)		_	
Peterson Law Group, F	PLLC			
	(Firm/Company)		_	
418 Canal Street				
	(Address)		_	
New Smyrna Beach, F	32168			
	City, State and Zip Code)		_	
tparker@418canal.com				
	e used for future annual re	nort potifications)	_	
For further information	on concerning this ma	tter, please call	:	
Troy D. Parker, Esq.		at (386	428-	2464
(Name of Conta	et Person)		c) (Day	ytime Telephone Number)
	or the following amou a bank located in the		proces	sed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filin and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add				t Address:
New Filing So Division of C				Filing Section ion of Corporations
P.O. Box 632	•			Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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.

l. Ka	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: mping Adventures, LLC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a LLC
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fir	st organized, formed or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
on	October 19, 2019
	October 19, 2019 (date of organization, formation or incorporation)
	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
	nping Adventures, LLC
	(Enter Name of Florida Limited Liability Company)
4.	If not effective on the date of filing, enter the effective date:
(Tt the	te effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after date this document is filed by the Florida Department of State.)
doci	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the iment's effective date on the Department of State's records.
5. 1	he plan of conversion has been approved in accordance with all applicable statutes.
5. T	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 15	day of December	20_22
Signature of Auth	norized Representative o	f Limited Liability Company:
Signature of Author Printed Name: Rona	orized Representative:	Title: Manger/Owner
Signature(s) on be	half of Other Business Er	ntity: [See below for required signature(s)]
Signature: Printed Name: Rona	ald L. Shamblin	Title: Manager/Owner
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature: Printed Name:		Title:
Printed Name:		Title:
Signature:	·····	
Printed Name:		Title:
If Directors or Offic If Florida General Signature of one Ge	nan, Vice Chairman, Direct cers have not been selected Partnership or Limited I eneral Partner.	, an Incorporator must sign.
Signatures of <u>ALL</u>	General Partners.	
<u>All others:</u> Signature of an auth	orized person.	
Fees:		
Articles of	Conversion:	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status: PILED
2023 FEB 14 PH 3: 10
FALLAHASSEE. FLORIS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Kamping Adventures, LLC			
	ords "Limited Liabi	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and street	address of the p	principal office of the Limited Liability Compan	y is:
Principal Office Address:		Mailing Address:	
824 East 14th Avenue		824 East 14th Avenue	
New Smyrna Beach, FL, 32169		New Smyrna Beach, FL, 32169	
(The Limited Liability Company cannot business entity with an active Florida re The name and the Florida street	serve as its own Regi gistration.)	ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:	
(The Limited Liability Company cannot business entity with an active Florida re	serve as its own Regi gistration.) t address of the hamblin	istered Agent. You must designate an individual or another registered agent are:	
(The Limited Liability Company cannot business entity with an active Florida re The name and the Florida stree	serve as its own Regi gistration.) t address of the	istered Agent. You must designate an individual or another registered agent are:	
(The Limited Liability Company cannot business entity with an active Florida re The name and the Florida stree	serve as its own Regi gistration.) t address of the hamblin Nam	istered Agent. You must designate an individual or another registered agent are:	
(The Limited Liability Company cannot business entity with an active Florida reference and the Florida street Ronald L. S. 824 East 14	serve as its own Regi gistration.) t address of the hamblin Narr th Avenue	istered Agent. You must designate an individual or another registered agent are:	
(The Limited Liability Company cannot business entity with an active Florida reference and the Florida street Ronald L. S. 824 East 14	t address of the hamblin Nan th Avenue eet address (P.0	registered agent are: ne D. Box NOT acceptable)	
The name and the Florida street Ronald L. S 824 East 14 Florida street	t address of the hamblin Nan th Avenue eet address (P.0	registered agent are:	

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager	
"MGR" = Manager	
MGR	Ronald L. Shamblin
	824 East 14th Avenue,
	New Smyrna Beach, FL 32169
	
	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
7	-
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the nent to the Department of State constitutes a third degree felo
Ronald L. Shamblin	
	and or printed name of signal
Tvr	red of bringed harne of signee
Тур	ped or printed name of signee
	Filing Fees Forganization and Designation of Registered A