123000114976

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





100404131391

7

2023 MAR -6 AM 2: 01 SECRETARY OF STATE



LOUIS C. ANDERSON, J.D., P.L. Corporate Center-by-the-Sea 224 Commercial Boulevard, Suite 310 Lauderdale-by-the-Sea, FL 33308-444 954.772.8050 • Fax: 954.491.3739 e-mail: lou@anderlaw.com www.anderlaw.com

7 March 2023

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Articles of Dissolution for 4025 EAST COLONIAL LLC Registration #: L23000012674

Dear Representative:

The members of the above named LLC have filed the Articles of Dissolution of this company and have no intentions of reinstating L23000012674 and would like to release the name to the CONVERSION. Thank you.

Sincerely,

LOUIS C. ANDERSON, ESQ.

2023 HAR -6 AM 2: 0

COVER LETTER

TO: New Filing Se	ection orporations		!				
SUBJECT: 4025 EAS	ST COLONIAL, LLC		i				
	(Name of Re	sulting Florida Lir	nited Con	opany)	-		
The enclosed Articles Business Entity" into	of Conversion Arti	cles of Ozonia		1.0	to conver	1 an "(.S.	Other
Please return all corre					•		
LOUIS C. ANDERSON,	ESQ.						
	(Contact Person)		†			•	
LOUIS C. ANDERSON,	J:D., P.L.		1				
	(Firm/Company)		+			1	
224 COMMERCIAL BLY	/D, SUITE 310						
	(Address)		1				
LAUDERDALE BY THE	•						
(Ci	ity, State and Zip Code)		+				
LEGAL-ASSISTANT @	ANDERLAW,COM						
E-mail Address: (to be	used for future annual re	port notifications)	†				
For further information							
LOUIS C. ANDERSON,		_at (772-80	050			
(Name of Contact	Person)	(Area Code	(Davt	ime Telephone Number)	_		
Enclosed is a check for	r the following and	,	, , , ,				
Enclosed is a check for dollars and drawn on a	bank located in the	unt: (All checks United States)	processe	ed by this office must	be payal	ole in I	JS
(\$25 for Conversion	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	Fees by	O\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Address New Filing Second Division of Corp. P.O. Box 6327 Tallahassee, FL	tion porations		New Fi Divisio The Ce 2415 N	Address: ling Section n of Corporations ntre of Tallahassee . Monroe Street, Suit ssee, FL 32303	SECRETARY OF STATE	2023 MAR -6 AM 2: 01	

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

The A	ticles of Conversion and attached Articles of On-	
"Othe Statute	ticles of Conversion <u>and attached Articles of Org</u> r Business Entity" into a Florida Limited Liabili s.	y Company in accordance with s.605.1045, Florid
1. The	name of the "Other Business Entity" immediately past COLONIAL, a Florida Partnership	prior to the filing of the Articles of Conversion is:
	(Enter Name of Other Business	Entity)
2. The	"Other Business Entity" is a General Partnership	, ;
į	(Enter entity type. Example: corporation, limited partn	ership, general partnership, common law or business trust, et
First o	ganized, formed or incorporated under the laws of	LORIDA
on SEF	TEMBER 2, 2014	er state, or if a non-U.S. entity, the name of the country)
	e of organization, formation or incorporation)	
3. The	name of the Florida Limited Liability Company as	set forth in the attached Articles of Organization:
4025 E	AST COLONIAL, LLC	,
	(Enter Name of Florida Limited Liability	Company)
4. If n	ot effective on the date of filing, enter the effective of	ote:
the day	ffective date: Cannot be prior to date of receipt of the this document is filed by the Florida Department the date inserted in this block does not meet the applicable states affective date on the Department of State's records.	filed date nor more than 90 calendar days after
5. The	plan of conversion has been approved in accordance	with all applicable statutes.
6. The which	'Converted or Other Business Entity" has agreed to path such members are entitled under ss. 605.1006 and 60	y any members having appraisal rights the amount to 05.1061-605.1072, F.S.
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, }		023 K SECRI TAL
,		2023 HAR -6 AH 2: 02 SECRETARY OF STATE TALLAHASSEE, FL
		SO DE PI
} :		SSEE, STEEL
		AH 2: 02 OF STATE SEE, FL

Signe	d this day of _MARCI+	20 <u>2.\$</u>	
Signa	ture of Authorized Representative of Lim	ited Liability Company:	
	ture of Authorized Representative:		
Printe	d Name: TERRY A BOND	Title: MANAGER	
	,		
Signa	ture(s) on behalf of Other Business Entity	[See below for required signature(s)]	
Signat	ure: Peres G. Bond	,	
Printe	d Name: TERRY A. BOND	Title: GENERAL PARTNER	
۵.			
Signat	ure:		
гище	Name:	Title:	
Signat	ure:		
Printe	Name:	Title:	
	!		
Signat	ure:		
Limite	Name:	Title:	
Signat	ůre:		
Printe	Name:	Title:	
Signat	ure:		
rnnte	Name:	_ Title:	
If Flor	ida Corporation:		
Signat	ure of Chairman, Vice Chairman, Director, or	Officer	
If Dire	ctors or Officers have not been selected, an In	corporator must sign.	
		<u> </u>	
Signat	ida General Partnership or Limited Liabili ure of one General Partner	ty Partnership:	
السلعدا	e of the General Parmer.		
If Flor	ida Limited Partnership or Limited Liabili	ty Limited Partnershin	
Signati	ires of ALL General Partners.	sy sameted a decising.	
ATI ALL]		
All oth Signati	ire of an authorized person.		
)		
Fees:	;		
		i	
	Articles of Conversion:	\$25.00	
	Fees for Florida Articles of Organization:	\$125.00	
	Certified Copy: Certificate of Status:	\$30.00 (Optional)	
	jewanome of Status.	\$5.00 (Optional)	又
			\equiv

SECRETARY OF STATE TALLAHASSEE, FL

2023 HAR -6 AM 2: 02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: 4025 EAST COLONIAL, 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: Mailing Address: 3111 NE 57TH STREET 3111 NE 57TH STREET FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308 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: TERRY A. BOND Name 3111 NE 57TH STREET Florida street address (P.O. Box NOT acceptable) FORT LAUDERDALE City

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 Agen's Signature (REQUIRED)

(CONTINUED)



Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	
WGK	TERRY A. BOND
	3111 NE 57TH STREET
	FORT LAUDERDALE, FL 33308
(Use attachment if necessary)	
I E 17. Od	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	2 0
REQUIRED SIGNATURE:	Bond
11 7	Bond
Signature of a member or a	is authorized representative of a member
Signature of a member or a This document is executed in accordance w	n authorized representative of a member
Signature of a member or a. This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ent to the Department of State constitutes a third degree for
Signature of a member or a. This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ent to the Department of State constitutes a third degree for
Signature of a member or a. This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.	n authorized representative of a member