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| (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: |
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COVER LETTER

| TO: New Filing Section Division of Corporations | | | |
|---|--|--|--|
| SUBJECT: Ryan Painter (Name of Resu | Show Sto Iting Florida Limited Com | ibles LL pany) | <u>C</u> |
| The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lia | es of Organization, and bility Company" in ac | I fees are submicordance with s | itted to convert an "Other s. 605.1045, F.S. |
| Please return all correspondence concerning | this matter to: | | |
| Ryan Painter (Contact Person) Ryan Painter Show (Firm/Company) 2775 NW 49th Ave (Address) | Stables Lic Ste 205-314 | | |
| Ocala FL 3448: (City, State and Zip Code) Info Oryanpainters now E-mail Address: (to be used for future annual rep | | | 23 FAL |
| For further information concerning this mat | | 99 –0534 time Telephone N | |
| Enclosed is a check for the following amoundollars and drawn on a bank located in the U | nt: (All checks process Juited States) | sed by this offic | e must be payable in US |
| S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) S150.00 Filing Fees and Certificate of Status | ☐\$180.00 Filing Fees and Certified Copy | S185.00 Filing Certified Copy, Certificate of Sta | and |
| Mailing Address: New Filing Section | | t Address: Filing Section | |

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

New Filing Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

lnto

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: - Ruga Fainter Show Stables LLC. |
|--|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a <u>limited liability Company - Corporation</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc. |
| First organized, formed or incorporated under the laws of |
| on January 01, 2018 (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Cyan Painter Show Stables LC (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: March 15,7073 of 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.

| Signed this <u> </u> | 20_23 | | |
|---|--|---------------------------------------|-----------------|
| Signature of Authorized Representative of Limit | ed Liability Company: | | |
| Signature of Authorized Representative: Lyan Printed Name: Lyan Painter | Tille: President & Chairm | αn | |
| Signature(s) on behalf of Other Business Entity: [S | | | |
| Signature: Ryan Painter Printed Name: Ryan Painter | Tille: President : Chairma | λn | |
| Signature:Printed Name: | Title: | | |
| Signature:Printed Name: | Title: | | |
| Signature:Printed Name: | Title: | 23 MAR SECRETA TALLAHA | -1 7 |
| Signature: Printed Name: Signature: Printed Name: Signature: Printed Name: | Title: | R 10 PH | |
| Signature:Printed Name: | Title: | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | C |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Clif Directors or Officers have not been selected, an Inc. | Officer. corporator must sign. | · | |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner. | y Partnership: | | |
| If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners. | y 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 - Nar The name of the Li | ne: mited Liability Company is | s: | | | |
|--|---|---|---|--|-------------------------------------|
| - Ry | an Painter Sist contain the words "Limited Liabi | how lity Company, " | Stables L.L.C.," or "LLC.") | LLC | |
| ARTICLE II - Ad | dress: | | or a calca t incie | l Linkility Com | nonitie: |
| The mailing addres | ss and street address of the | principal of | ace of the Limit | ed Liability Com | pany is. |
| Principal Office A | ddress: | Mailing | Address: | | |
| 21551 SE Marriston, | 42nd St FL 3210108 | 27- St | 75 NW L cala, FL | 19th Ave 4 34482 | |
| (The Limited Liability C | egistered Agent, Register ompany cannot serve as its own Regactive Florida registration.) | ed Office, & gistered Agent. ' | k Registered Ag You must designate an | gent's Signature i individual or another | : |
| The name and the | Florida street address of the | e registered | agent are: | As 2 | |
| | Quan | Painter | | 23 KAR 10 SECRE (Assignment) FALLAHASSI | \neg |
| | Nai | me | | 8 I | |
| | 21551 SE | H7 nd | S+ | 22 PH | |
| | Florida street address (P. | .O. Box <u>NO</u> | T acceptable) | 1 22 1 | |
| | Morriston | FL | 32008 | 52 5m ひ | |
| | Morriston City | | Zip | · | |
| liability comp registered agent statuaes relatin | med as registered agent and pany at the place designated and agree to act in this cap g to the proper and complete bligations of my position as | l in this certi acity. I furti te performan | ficate, I hereby a her agree to com ace of my duties, a | ccept the appoint ply with the provi and I am familiar | nent as sions of all with and |

(CONTINUED)

| A | DT | Т | C^{\dagger} | F | IV- |
|-----|--------------|---|---------------|---|------|
| 7 % | \mathbf{r} | | | | 1,7- |

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

| "MGR" = Manager AmBR | Ryan Painter 2775 NW 49th Ave Ste 205-314 |
|----------------------------------|---|
| <u>mbr</u> | Ocala, FL 34482 Lance Bryson 2775 NW 49th Ave Ste 205-314 Ocala, FL 34482 |
| | |
| (Use attachment if necessary) | |
| | ŢĄ. |
| CLE V: Other provisions, if any. | 23 MAR 10 SECRETARY TALLAHASSI |
| REQUIRED SIGNATURE: | ARC 48 ARC 28 ASA 22 |
| Signature of a member or | HAR 10 PH 1:1 |