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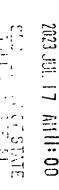
(Re	equestor's Name)	
(Ad	(dress)	-
	ldress)	
(^0	iu(e33)	
(Cit	ty/State/Zip/Phone #	⁽¹⁾
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(Bu	siness Entity Name)
\-		,
(DO	cument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	
Special instructions to	r inng Onicer.	

Office Use Only



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COVER LETTER

TO: New Filing Sec Division of Cor					
SUBJECT: 204 SunDu	une LLC				
30b/EC1.		ulting Florida Limit	ed Con	npany)	
				d fees are submitted to eccordance with s. 605.10	
Please return all corres	pondence concerning	g this matter to:			
Scott M Kennedy					
	(Contact Person)		-		
	(Firm/Company)				
200 Sweet Tea Lane	(Address)		-		
Freeport, Florida 32439	(Addition)				
(Ci	ty, State and Zip Code)		-		
smken54@gmail.com	•				
E-mail Address: (to be	used for future annual re	port notifications)	-		
For further information	n concerning this ma	tter, please call:			
Scott M Kennedy		_at (<u>303</u>	378-2	2748	
(Name of Contact	Person)	(Area Code)	(Day	rtime Telephone Number)	
Enclosed is a check fo dollars and drawn on a			rocess	sed by this office must be	e payable in US
(\$25 for Conversion	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Addre				t Address:	2023 JUL Sec :
New Filing Sec Division of Co				Filing Section ion of Corporations	
P.O. Box 6327	•			Centre of Tallahassee	_

2415 N. Monroe Street, Suite 8107

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

Into

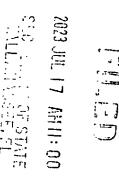
Florida Limited Liability Company

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: 204 SunDune 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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
on 01/03/2023 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
204 SunDune 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.) 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 13	day of July	20) 23		
Signature of Aut	horized Representative of	f Limited	Liability Com	yany:	
Signature of Authorities Printed Name; Scot	orized Representative:	The T	itle: Member		
Signature(s) on be	ehalf of Other Business Er	<u>itity:</u> See	below for requ	ired signatu	re(s)]
Signature:(Printed Name: Jan	A Kennedy	enn A	itle: Member		
Signature: Printed Name:		_ 1	`itle:	·	
Signature: Printed Name:		 'I	`itle:		
Signature: Printed Name:		1	fitle:		
Signature: Printed Name:			Гitle:		_
Signature: Printed Name:		 	Title:	· 	
If Florida Corpo Signature of Chair If Directors or Of	<u>ration:</u> rman, Vice Chairman, Direc ficers have not been selecte	ctor, or Off d, an Incor	ficer. porator must sig	gn.	
If Florida Gener Signature of one G	<u>al Partnership or Limited</u> General Partner.	Liability	Partnership:		
	ed Partnership or Limited L General Partners.	Liability	Limited Partne	ership:	
All others: Signature of an ar	uthorized person.				
Fees:					
Fees for Certified	of Conversion: Florida Articles of Organiz Copy: te of Status:	zation:	\$25.00 \$125.00 \$30.00 (Option \$5.00 (Optiona		

2023 JUL 17 AHII: 00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	
204 Cur Duran I I C	
204 SunDune LLC (Must contain the words "Limited Liabili	ity Company "L.L.C." or "L.L.C.")
(as contain the note.)	ing company, surrow, or times, y
ARTICLE II - Address:	
The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
200 Sweet Tea Lane	200 Sweet Tea Lane
Freeport, FL	Freeport, FL
32439	32439
The name and the Florida street address of the Scott M Kennedy	registered agent are:
Nam	ne
200 Sweet Tea Lane	
Florida street address (P.C	D. Box NOT acceptable)
Freeport	FL ³²⁴³⁹
City	Zip
liability company at the place designated i registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S
	20

(CONTINUED)

<u>Title:</u>	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager				
AMBR	Scott M Kennedy			
	200 Sweet Tea Lane			
	Freeport, FL 32439			
AMBR	Jan A Kennedy			
	200 Sweet Tea Lane			
	Freeport, FL 32439			
				
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	-			
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(Use attachment if necessary)		OF STATE		
		1.00 I		
FICLE V: Other provisions, if any.		រក់ ⊆		
ting Employer Identification Number 81-490	07985			
	· · · · · · · · · · · · · · · · · · ·			
		-		

REQUIRED SIGNATURE:

Signature of a member of 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.

Scott M Kennedy

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)