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(Requestor's Na	ame)
(Address)	
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PICK-UP WAI	T MAIL
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COVER LETTER

Division of Corporatio	ns						
SUBJECT: MOSS LEGACY L	LC						
30B0ECT		ting Florida Limited	Company)				
The enclosed Articles of Conv Business Entity" into a "Floric		•	•			:"Other	
Please return all corresponden	ce concerning	this matter to:					
SUSAN MOSS							
(Contac	t Person)						
(Firm/C	ompany)						
613 TIMBER POND DR							
(Add	dress)						
PONTE VEDRA BEACH, FL 320	082						
(City, State a	and Zip Code)	-					
smoss@pauldavis.com							
E-mail Address: (to be used for	future annual repo	ort notifications)					
For further information concer	ming this matte	er, please call:					
SUSAN MOSS		at (<u>6.61</u>)	607 -	5237			
(Name of Contact Person)		· \	(Daytime Teleph				
Enclosed is a check for the foldollars and drawn on a bank lo	_	•	cessed by this	s office must be	payable PACE CRE		* - 1 2
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Mailing Address:			treet Address		끈달	ភ្មិ	
New Filing Section			ew Filing Sec		r:ı	.*	
Division of Corporatio P.O. Box 6327	ns		ivision of Cor he Centre of T	•			
Tallahassee, FL 32314				e Street, Suite 8	310		
a marriada (a da d			allahassee, FL		-		

Articles of Conversion For "Other Business Entity"

Into

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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: MOSS LEGACY LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
MAY 08, 2019 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:
MOSS LEGACY LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
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 _	17 day of JULY	20
Signature of	f Authorized Representative of	Limited Liability Company:
Signature of	Authorized Representative: —	Seem b Maso Title: MEMBER
		ity: [See below for required signature(s)]
Printed Name	DEL MOSS	Title: MEMBER
Signature: Printed Name	Suou Muss 2: SUSAN MOSS	Title: MEMBER
Printed Name	2:	Title:
Signature: _		Title:
Signature: Printed Name	e:	Title:
Signature:		Title:
Printed Name	e:	Title:
	orporation: Chairman, Vice Chairman, Director Or Officers have not been selected,	
If Florida G Signature of	eneral Partnership or Limited L one General Partner.	iability Partnership:
	imited Partnership or Limited L ALL General Partners.	iability Limited Partnership:
All others: Signature of	an authorized person.	
Fees:		
Fees Certi	les of Conversion: for Florida Articles of Organizat fied Copy: ficate of Status:	\$25.00 ion: \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
The name of the Enimed Elability Company is.	•	
MOSS LEGACY LLC		
(Must contain the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	rincipal office of the Limited I	Liability Company is:
Principal Office Address:	Mailing Address:	
613 TIMBER POND DRIVE	613 TIMBER POND DRIVE	
PONTE VEDRA BEACH, FL 32082	PONTE VEDRA BEACH, FL	32082
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the	stered Agent. You must designate an indi	
SUSAN MOSS		
Nam	e	
613 TIMBER POND DRIVE		
Florida street address (P.C	D. Box <u>NOT</u> acceptable)	
PONTE VEDRA BEACH	FL ³²⁰⁸²	202 SE
City	Zip	38
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capact statutes relating to the proper and complete accept the obligations of my position as registered.	n this certificate, I hereby acception of the certificate of the comply with the performance of my duties, and registered agent as provided for its many the complex of the	ot the appointment as T vith the provisions of all I am familiar with and
Registered Agent's Sig	nature (KEQUIKED)	

(CONTINUED)

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	JOEL MOSS
	613 TIMBER POND DRIVE
	PONTE VEDRA BEACH, FL 32082
AMBR	SUSAN MOSS
	613 TIMBER POND DRIVE
	PONTE VEDRA BEACH, FL 32082
(Use attachment if necessary) CLE V: Other provisions, if any.	
DECLIDED CLCNATUDE.	-463 -0
REQUIRED SIGNATURE;	
ν	
Suce	a B Mas
Signature of a member or This document is executed in accordance	an authorized representative of a member of with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree in
Signature of a member or This document is executed in accordance any false information submitted in a docu	an authorized representative of a member of with section 605,0203 (1) (b), Florida Statutes, I am awar

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)