123000463866

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

Office Use Only



700416768117

10/05/23--01035--015 **185.00



LAW OFFICE

OF

CONRAD WILLKOMM, P.A.

3201 Tambami Trafi, North (2nd Floor - Naples) (Florida) 34103

October 3, 2023

UPS GROUND

Florida Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: 1020 Plain Street, LLC, Investin, LLC & Old Webster Street, LLC Our File No.: 23B.1220.CW

To Whom It May Concern:

Enclosed, please find the following documents:

- Cover Letter:
- Check No. 2323 in the amount of \$185.00 representing payment for the Conversion Fee, Certified Copy, and Certificate of Status for Investin, LLC;
- Check No. 2324 in the amount of \$185.00 representing payment for the Conversion Fee, Certified Copy, and Certificate of Status for 2020 Plain Street, LLC:
- Check No. 2322 in the amount of \$185.00 representing payment for the Conversion Fee, Certified Copy, and Certificate of Status for Old Webster Street, LLC;
- > Executed Articles of Conversion for Investin, LLC, Old Webster Street, and 1020 Plain Street, LLC; and
- Executed Articles of Organization for Investin, LLC, Old Webster St LLC, and 1020 Plain Street, LLC.

Thank you and please let me know if you should have any questions in regthis matter.

Respectfully,

LAW OFFICE OF CONRAD WILLKOMM, P.A.

Desiree' A. Boissiere

Paralegal

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Old Webster Street, LLC			
(Name of Res	ulting Florida Li	mited Com	pany)
The enclosed Articles of Conversion, Articles Business Entity" into a "Florida Limited Li-	es of Organiz ability Compa	ation, and my" in ac	d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter t	o:	
Conrad Willkomm, Esq.			
(Contact Person)	·		
Law Office of Conrad Willkomm, P.A.			
(Firm/Company)		- <u></u>	
3201 Tamiami Trail N, 2nd Floor			
(Address)			
Naples, FL 34103			
(City, State and Zip Code)			
conrad@swfloridalaw.com			
E-mail Address: (to be used for future annual re	port notification	<u>~}</u>	
For further information concerning this ma	tter, please ca	11:	
Conrad Willkomm	_at (_ ²³⁹	262-	5303
(Name of Contact Person)	(Area Co	ode) (Day	time Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the	int: (All check United States	ts process)	sed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	□S180.00 Fi and Certified		S185,00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address:			t Address:
New Filing Section			Filing Section
Division of Corporations			ion of Corporations Tentre of Tallahassee
P.O. Box 6327 Tallahassee, FL 32314			N. Monroe Street, Suite 810

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: Old Webster Street, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LEC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
4/24/2008
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Old Webster Street, 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 14 day of September	_20_23
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Eric Lin	ont
Printed Name: Eric Limont	Title: Manager
Signature(s) on behalf of Other Business Entity:	
Signature: Eric Limont	
Printed Name: Eric Limont	Title: Manager
Printed Name: Eric Limont Signature: (1) 6	
Signature: (1.10), manual Sandya Romano	mats. Manager
Finited Name: Caroyig/Comano	Truc. Manager
Signature:	
Printed Name:	
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Timed Name.	
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Old Webster Street, LLC (Must contain the words "Limited L	iability Company, "L.I. C.," or "LI,C.")
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1920 Sandpiper Street	1920 Sandpiper Street
Naples, FL 34102	Naples, FL 34102
3201 Tamiami Trail N. 2	Name
Florida street address	(P.O. Box NOT acceptable)
	34103
Naples City	Zip

(CONTINUED)

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

<u>`itle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Eric Limont
	1920 Sandpiper Street
	Naples, FL 34103
MGR	Carolyn Romano
	1920 Sandpiper Street
	Naples, FL 34103
·	
E \mathbf{V} : Other provisions, if any, nanager managed company. Any r	
Use attachment if necessary) E.V: Other provisions, if any, manager managed company. Any refithe members of other manager(s)	nanager may take any action on behalf of the company v
E.V: Other provisions, if any, nanager managed company. Any refithe members of other manager(s)	
E V: Other provisions, if any, nanager managed company. Any ref the members of other manager(s).
E.V: Other provisions, if any, nanager managed company. Any refithe members of other manager(s	
E.V: Other provisions, if any, nanager managed company. Any refithe members of other manager(s.) EQUIRED SIGNATURE: Exic Light for the company.	MOHĖ L. 121 (SAUES)
E V: Other provisions, if any, nanager managed company. Any refithe members of other manager(s) EQUIRED SIGNATURE: Signature of a member. This document is executed in accord.	or an authorized representative of a member
E V: Other provisions, if any, nanager managed company. Any ref the members of other manager(s) EQUIRED SIGNATURE: Exiculation Signature of a member This document is executed in accordany false information submitted in a conductive submitted submi	or an authorized representative of a member ance with section 605,0203 (1) (b), Florida Statutes, I am awar focument to the Department of State constitutes a third degree
E V: Other provisions, if any, manager managed company. Any ref the members of other manager(s) EEQUIRED SIGNATURE: Exiculation Signature of a member This document is executed in accordany false information submitted in a cas provided for in s.817.155, F.S.	or an authorized representative of a member

LAW OFFICE OF CONRAD WILLKOMM, P.A.

3201 TAMIAMI TRAIL NORTH - 2ND FLOOR - NAPLES - FLORIDA - 34103

October 3, 2023

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