# L23000475291

(1	Requestor's Name)
	Address)
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(,	Address)
<del> </del>	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
,	, · · · · · · · · · · · · · · · · ·
(1	Document Number)
Certified Copies	Certificates of Status
	· ——
Special Instructions to F	filing Officer:

Office Use Only



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S. CHATHAN

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### **CT CORP**

## (850) 656- 4724 3558 lakesore Drive Taliahassee, FL 32312

10/17/2023

W.P. Verifier \_\_\_

Ref#

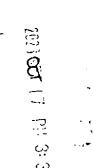
Da	ite:	10/17/2023	- wil SW
		Acc#I20160000072	anic Jav
Name:	Bowl Americ	a of Florida, Inc.	
Document #:			
Order #:	15177575		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination:  Number of Certs:	
Filing: 🚺	Certified: Plain: COGS:		Email Address for Annual Report Notifications  Jason Cohen Bowlero  corp. com
Availability  Document  Examiner  Updater	Amount: \$	150.00	

#### **COVER LETTER**

TO:	New Filing Se Division of Co				
CHD		erica of Florida I, LLC			
SUD	JECT:	(Name of Resi	ulting Florida L	imited Com	pany)
The c Busir	enclosed Articles ness Entity" into	s of Conversion, Articl a "Florida Limited Lia	es of Organi ability Comp	zation, and any" in ac	d fees are submitted to convert an "Othe ecordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concerning	this matter	to:	
Jaso	n Cohen				
		(Contact Person)	<del>-</del> -		
Bowl	ero Corp.			<del></del>	
		(Firm/Company)			
7313	Bell Creek Road				
-		(Address)	<u> </u>	<del></del>	
Mech	nanicsville, VA 23	111			
	((	City, State and Zip Code)			
Jaso	nCohen@Bowlerd	ocorp.com			
E-	mail Address: (to b	e used for future annual re	port notification	ns)	
For f	urther informati	on concerning this ma	tter, please c	all:	
Jaso	п Cohen		_at (	7772	214
	(Name of Conta	ict Person)	(Area C	ode) (Day	time Telephone Number)
		for the following amous a bank located in the			sed by this office must be payable in US
& \$10	50.00 Filing Fees for Conversion 25 for Articles ganization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 F and Certified		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations 27		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Conversion For "Other Business Entity" Into 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:  Bowl America of Florida, Inc.
(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)
April 7, 1971
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:
Bowl America of Florida I, 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 17th day of October	_ 20 <u>23</u> .
Signature of Authorized Representative of Limi	ted Liability Company:
	Court Segrend by
Signature of Authorized Representative:	Title: Authorized Representative
Printed Name: Jason Conen	Title: Additionized (Vepresentative
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Thomas Slavion Printed Name: Thomas F. Shannon	
Printed Name: Thomas F. Shannon	Title: President and CEO
Signature:	
Signature:Printed Name:	Title:
Timed Name.	
Signature:	
Signature:Printed Name:	Title:
Signature:	<u></u>
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	
Signature:	
Printed Name:	Title:
If Florida Corporation:	06
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
	4. Limited Doutnoughing
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership.
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
_	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Bowl America of Florida I, LLC		
	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	s:
Principal Office Address:	Mailing Address:	
7313 Bell Creek Road	7313 Bell Creek Road	
Mechanicsville, VA 23111	Mechanicsville, VA 23111	
The name and the Florida street address o	Etha registered agent are:	
	rporation System	
CTCo		
C T Co	Name  Pine Island Road  (P.O. Box NOT acceptable)	
C T Co	Name  Pine Island Road  (P.O. Box NOT acceptable)	
1200 South Florida street address	Name  Pine Island Road  (P.O. Box NOT acceptable)	• •

(CONTINUED)

#### ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Bowl America I, LLC	
	7313 Bell Creek Road	
	Mechanicsville, VA 23111	
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(Use attachment if necessary)		
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HOLDIN O.1		<u>သ</u>
<b>FICLE V:</b> Other provisions, if any.		. Oh
REQUIRED SIGNATURE:		
Constance	t be	
Jason (	dun	
a 1754ABASS		
Signature of a member or	an authorized representative of a me	mber

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.

Jason Cohen Typed or printed name of signee