L23000477381

(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:

Office Use Only

N 10



400417434994

10917/23-401327--016 **180,00

COVER LETTER

in I Community
ited Company)
ion, and fees are submitted to convert an "Other y" in accordance with s. 605.1045, F.S.
_
_
_
_
_
, 681-5179
) 681-5179 (Daytime Telephone Number)
processed by this office must be payable in US
g Fees \$\Bigcup \\$185.00 \text{ Filing Fees,} \\ Certified Copy, and \\ Certificate of Status
Street Address:
New Filing Section
Division of Corporations The Centre of Tallahassee

2415 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:

Blind Pass Racing, LLC

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(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)
06/10/2021 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: Blind Pass Racing, LLC
billio Pass Racing, 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 Rusiness 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.

Signature of Authorized Representative of Limi	7
Signature of Authorized Representative:	wo of the
Printed Name: Daniel O. Maze	Title: Managing Partner
Signature(s) on behalf of Other Business Entity:	See below for required signatur
1	
Signature: Meller Transmer Milese Printed Name: Maria-Lana Maze	Title: General Partner
Timed Name.	Title.
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
	
Signature:	92.1
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signatura:	
Signature:	Title:
If Florida Corporation:	O#
Signature of Chairman, Vice Chairman, Director, or the Directors or Officers have not been selected, an Inc.	
	orporator mast organ
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
A.D. 71	
All others: Signature of an authorized person.	
orginature of all authorized person.	
Fees:	
	\$25.00
Fees: Articles of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$125.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nar The name of the Li	ne: imited Liability Company is	:
Blind Pass Racing L	LC ust contain the words "Limited Liabil	ity Company, "L.L.C.," or "Ll.C.")
ARTICLE II - Ad	ldress:	principal office of the Limited Liability Company is:
Principal Office A	Address:	Mailing Address:
400 64th Avenue, # St. Pete Beach, FL		400 64th Avenue, #1107W St. Pete Beach, FL 33706
(The Limited Liability Cobusiness entity with an		d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another registered agent are:
	Daniel O. Maze	
	Nan	ne
	400 64th Avenue, #1107W Florida street address (P.	D. Box NOT acceptable)
	St. Pete Beach,	FL ³³⁷⁰⁶
	City	Zip
	_	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Fitle:</u> 'AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	
MGR	Daniel O. Maze
	400 64th Avenue, #1107W
	St. Pete Beach, FL 33706
AMBR	Maria-Lana Maze
	400 64th Avenue, #1107W
	St. Pete Beach, FL 33706
(Use attachment if necessary)	
LE V: Other provisions, if any.	
LE V. Office provisions, it any.	
<u>, </u>	
-	
REQUIRED SIGNATURE:	
REQUINED STATE OF THE	(1 26
/ /wil	011

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.

Daniel O. Maze

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)



TEXAS COMPTROLLER OF PUBLIC ACCOUNTS

Comptroller.Texas.Gov

July 13, 2023

BLIND PASS RACING LLC 640 AMISTAD DR PROSPER TX 75078-8400

Certificate of Account Status

THE STATE OF TEXAS COUNTY OF TRAVIS

I, Glenn Hegar, Comptroller of Public Accounts of the State of Texas, DO HEREBY CERTIFY that according to the records of this office

BLIND PASS RACING LLC

has filed all required reports for taxes administered by the Comptroller under Title 2, Tax Code, and taxes reported due on those reports have been paid. This certificate must be filed with the Texas Secretary of State to legally end the entity's existence in Texas. This certificate is valid through December 31, 2023.

GIVEN UNDER MY HAND AND SEAL OF OFFICE in the City of Austin, this 13th day of July, 2023 A.D.

Glenn Hegar

Texas Comptroller

Taxpayer number: 32079660679

File number: 0804105343



Jane Nelson Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Blind Pass Racing LLC (file number 804105343), a Domestic Limited Liability Company (LLC), was filed in this office on June 10, 2021.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 13, 2023.



John Melion

Jane Nelson Secretary of State

: (512) 463-5709 -TID: 10264

Dial: 7-1-1 for Relay Services