# 2400007/124

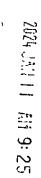
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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## COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Villages Dining Club, LLC			
(Name of Resulting Florida Limited Company)			
The enclosed Articles of Conversion, Articles of Organization, and Business Entity" into a "Florida Limited Liability Company" in account			
Please return all correspondence concerning this matter to:			
Tommy D. Permenter, Jr., Esquire (Contact Person)			
The Permenter Law Firm, P.A. (Firm/Company)			
2201 S.E. 30th Avenue, Suite 202  (Address)			
Ocala, Florida 34471			
(City, State and Zip Code)			
Tommy@Permenterlaw.com  E-mail Address: (to be used for future annual report notifications)			
For further information concerning this matter, please call:			
Tommy D. Permenter, Jr., Esquire at (352) 622– (Name of Contact Person) (Area Code) (Daytin	1811 ne Telephone Number)		
Enclosed is a check for the following amount: (All checks processed dollars and drawn on a bank located in the United States)	by this office must be payable in US		
(\$25 for Conversion and Certificate of and Certified Copy C	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Address:Street ANew Filing SectionNew FilDivision of CorporationsDivisionP.O. Box 6327The CenTallahassee, FL 323142415 N.	ing Section of Corporations are of Tallahassee Monroe Street, Suite 810 seee, FL 32303		

# **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: Villages Dining Club. Inc. P2200054359
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
Florida
(Enter state, or if a non-U.S. entity, the name of the country)
July 5, 2022
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Villages Dining Club, 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 8th day of December	20 23
Signature of Authorized Representative	e of Limited Liability Company:
Signature of Authorized Representative:	ndse.
Printed Name: David Sulciman	Title: Manager
Signature(s) on behalf of Other Business	Entity: [See below for required signature(s)]
Signature: 12 5	
Printed Name: David Suleiman	Title: President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	Title:
Frinted Name.	1 me:
Signature:	Tr. 1
Printed Name:	Title:
<u>If Florida Corporation:</u> Signature of Chairman, Vice Chairman, Dir If Directors or Officers have not been select	
If Florida General Partnership or Limite Signature of one General Partner.	d Liability Partnership:
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	d Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLE L. N.		
ARTICLE I - Name: The name of the Limited Liability Company	is:	
Villages Dining Club, LLC		<u>_</u> _
(Must contain the words "Limited Liab	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
10138 Lake Miona Way	10138 Lake Miona Way	
Oxford, Florida 34484	Oxford, Florida 34484	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	egistered Agent. You must designate an	
The name and the Florida street address of th	e registered agent are:	
David Suleiman		
Na	ime	
10138 Lake Miona Way		
	O.O. Box NOT acceptable)	
Oxford	FL 34484	
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as Registered Agent's S	l in this certificate, I hereby ac pacity. I further agree to comp te performance of my duties, a registered agent as provided f	scept the appointment as oly with the provisions of all and I am familiar with and for in Chapter 605, F.S
(CONT)	INUED)	

## 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	
MGR	David Suleiman
	10138 Lake Miona Way
	Oxford, Florida 34484
(Use attachment if necessary)	•
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CLE V: Other provisions, if any.	
<del></del>	
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DEALIDED CLOVATEOR	
REQUIRED SIGNATURE:	75 26
(2)	El:
Signature of a member or	an authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felong
David Suleiman	
Tyl	ped 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)