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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Na	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to I	Filing Officer:	
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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.

SHANKITGOLF LLC	•
(Enter Name of Other Business Entity)	
The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, co	ommon law or business trust, etc.)
First organized, formed or incorporated under the laws of	v. the name of the country)
October 1, 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:
SHANKITGOLF 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 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, the document's effective date on the Department of State's records.	is date will not be listed as the
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the	

Signature of Authorized Representative:	Are
Printed Name: Niels Ernest Stone V	Title: Managing Member
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: 975 Stee	
Signature: 975 Stone Printed Name: Niels Stone	Title: aunce
Signature.	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Tisla
Printed Name:	_ inte.
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
	Officer
Signature of Chairman, Vice Chairman, Director, or	Officer.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	corporator must sign.
Signature of Chairman, Vice Chairman, Director, or	corporator must sign.
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.	corporator must sign. ty Partnership:
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. If Florida Limited Partnership or Limited Liabili	corporator must sign. ty Partnership:
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.	corporator must sign. ty Partnership:
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. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others:	corporator must sign. ty Partnership:
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. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	corporator must sign. ty Partnership:
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. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others:	corporator must sign. ty Partnership:
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. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	ty Partnership: ty Limited Partnership:
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. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion:	ty Partnership: ty Limited Partnership:
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. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	ty Partnership: ty Limited Partnership:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Lia	bility Company i	s:	
SHANKITGOLF LLC			
	e words "Limited Liabi	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stre	et address of the	principal office of the Limi	ted Liability Company is:
Principal Office Address:		Mailing Address:	
24850 Old 41 Road, Suite 11	Old 41 Road, Suite 11 24850 Old 41 Road		e 11
Bonita Springs, Florida 34135		Bonita Springs, Florida 3	34135
ARTICLE III - Registered (The Limited Liability Company cann business entity with an active Florida The name and the Florida str	ot serve as its own Reg registration.)	gistered Agent. You must designate a	
Hamilton	Mikes, P.A.		
	Nai	me	
3301 Bor	nita Beach Road, S	Suite 200	
Florida	street address (P.	O. Box NOT acceptable)	
Bonita Sp	rings	FL ³⁴¹³⁴	
	City	Zip	
liability company at the registered agent and agree statutes relating to the pracept the obligations o	place designated to act in this cape oper and complet of my position as t stered Agent's Si	in this certificate, I hereby a acity. I further agree to come e performance of my duties, registered agent as provided gnature (REQUIRED)	aply with the provisions of all and Lam familiar with and for in Chapter 605, F.S.
	(CONT)	INUED)	D

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR/AMBR	Niels Ernest Stone V 24850 Old 41 Road, Suite 11 Bonita Springs, Florida 34135
 	
(Use attachment if necessary)	2024
RTICLE V: Other provisions, if any.	2024 Fran 2
REQUIRED SIGNATURE:	- IO: 22 b

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 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.

Niels Ernest Stone V, Managing Member

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)