124000241645

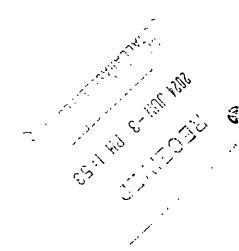
(Rec	questor's Name)	
(Add	iress)	
	,	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iiness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
9		

Office Use Only



600429637896

DOZIL JUN-3 AM 9: 4.7



FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

06/03/2024

NAME:

THAT GOLF GRIND LLC

TYPE OF FILING: CONVERSION

COST:

150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

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: THAT GOLF GRIND LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company
(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)
December 28, 2022 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:
THAT GOLF GRIND 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 rafter
4. If not effective on the date of filing, enter the effective date:
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will find the disted 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 31 day of May	2024
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative:	Pritale: Member
Signature(s) on behalf of Other Business Entity: [3	See below for required signature(s)]
Signature: mhalmtrill Printed Name: Michael Mitnick	
Printed Name: Michael Mitnick	_ Title: Member
Signature:	
Signature:Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	_ Title:
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or C If Directors or Officers have not been selected, an Inc	Officer.
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	
ong	O 1 (m)
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
THAT GOLF GRIND LLC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	

ARTICLE II - Address:

business entity with an active Florida registration.)

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:		
11725 18th Place East, Unit 412	11725 18th Place East, Unit 412		
Lakewood Ranch, FL 34211	Lakewood Ranch, FL 34211		

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

The name and the Florida street address of the registered agent are:

Michael Mitnick		2(
Na	ime	P	2024 J	
11725 18th Place East, Un	it 412		- NOC	620000 6200000 0 0
Florida street address (I	P.O. Box NOT acceptable)	3	ယ်	9
Lakewood Ranch	FL ³⁴²¹¹	ÄHASSEE.	A	
City	Zip	. FL	9: 47	

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)

A	D.	T'T	C1	T.	` T	V-
- * %	л		A . I		,	· -

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	Michael Mitnick
	11725 18th Place East, Unit 412
	Lakewood Ranch, FL 34211
(Use attachment if necessary)	
	2024 JUN
CLE V: Other provisions, if any.	AL
	ابر <u>تا ا</u>
	#: 1
	SEE S
REQUIRED SIGNATURE:	
101 h	al metral
r'uil	

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.

Michael Mitnick, 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)