L24000281789

(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:

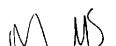
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COVER LETTER

TO:	New Filing Division of	Section Corporations			
SHRI	FCT. KEY FA	MILY HOLDINGS LLC			
3013	DC1		sulting Florida L	imited Cor	mpany)
The er Busine	elosed Articless Entity" int	es of Conversion, Artic o a "Florida Limited L	les of Organiz	zation, ar any" in a	nd fees are submitted to convert an "Othe accordance with s. 605.1045, F.S.
Please	rcturn all cor	respondence concernin	g this matter t	0:	
WALTE	ER KEY				
		(Contact Person)			
		(Firm/Company)		.	
628 BE	THEL DRIVE				
		(Address)			
KEYST	ONE HEIGHTS	S FL 32656			
	(City, State and Zip Code)			
WALTE	R.KEY@GMA	IL.COM			
E-ma	il Address: (to b	oe used for future annual re	port notification:	s)	
For fur	her informati	on concerning this ma	tter, please ca	II:	
WALTE	R KEY		at (⁷⁵⁷	635-	3645
	(Name of Conta	ect Person)	(Area Co	de) (Day	3645 ytime Telephone Number)
Enclose dollars	ed is a check f and drawn on	or the following amou a bank located in the	nt: (All check United States)	s proces	sed by this office must be payable in US
\$25 for (00 Filing Fees Conversion or Articles zation)	☐\$155.00 Filing Fees and Certificate of Status	□\$180,00 Fil and Certified 0	ing Fees Copy	D\$185.00 Filing Fees, Certified Copy, and Certificate of Status
j	Mailing Addı	<u>'ess:</u>		Stree	t Address:
]	New Filing So	ection			Filing Section
]	Division of C	orporations			ion of Corporations
	P.O. Box 632	7			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 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: KEY FAMILY HOLDINGS LLC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
2. The "Other Business Entity—is a	tc.)
First organized, formed or incorporated under the laws of	
JULY 25, 2018 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 KEY FAMILY HOLDINGS LLC	n:
(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	ю

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.



Signed this 19th day of Upn	20 24
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Printed Name: SAMANTHA KEY	Title: REGISTERED AGENT
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	Title: MEMBER
Signature: SAMANTHA KEY Printed Name: SAMANTHA KEY	Title: REGISTERED AGENT Menher
Signature:Printed Name:	
Signature:Printed Name:	_Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	SA SA CC
Fees:	FLOR
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

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must contain the words "Lin	mted Liability Company, "L.I.,C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	s of the principal office of the Limited Liability Company i
Principal Office Address:	Mailing Address:
628 Bethel Drive	628 Bethel Drive
Keystone Heights, FL 32656	Keystone Heights, FL 32656
(The Limited Liability Company cannot serve as business entity with an active Florida registration	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another in.)
(The Limited Liability Company cannot serve as	its own Registered Agent. You must designate an individual or another m.) css of the registered agent are: All All
(The Limited Liability Company cannot serve as business entity with an active Florida registration.) The name and the Florida street address.	its own Registered Agent. You must designate an individual or another m.) css of the registered agent are: All All
(The Limited Liability Company cannot serve as business entity with an active Florida registration.) The name and the Florida street address.	its own Registered Agent. You must designate an individual or another m.) css of the registered agent are: All All
(The Limited Liability Company cannot serve as business entity with an active Florida registratio The name and the Florida street addr SAMANTHA KEY 628 Bethel Drive	its own Registered Agent. You must designate an individual or another m.) ress of the registered agent are:
(The Limited Liability Company cannot serve as business entity with an active Florida registratio The name and the Florida street addr SAMANTHA KEY 628 Bethel Drive	its own Registered Agent. You must designate an individual or another m.) ress of the registered agent are: Name Name

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.

l'itle:	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	
AMBR	WALTER KEY
	628 Bethel Drive
	KEYSTONE HEIGHTS. FL 32656
AMBR	SAMANTHA KEY
	628 Bethel Drive
	KEYSTONE HEIGHTS, FL 32656
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
	n //
LE V: Other provisions, if any.	M
LE V: Other provisions, if any.	<u>M</u>
LE V: Other provisions, if any. REQUIRED SIGNATURE:	or an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member	or an authorized representative of a member ince with section 605.0203 (1) (b), Florida Statutes, I am aware to the content of
REQUIRED SIGNATURE: Signature of a member	ince with section 605,0203 (1) (b), Florida Statutes, I am aware t
REQUIRED SIGNATURE: Signature of a member This document is executed in accorda	ince with section 605.0203 (1) (b), Florida Statutes. I am aware to cument to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE: Signature of a member This document is executed in accorda any false information submitted in a das provided for in s.817.155, F.S.	or an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes, I am aware to ocument to the Department of State constitutes a third degree fell. Typed or printed name of signee

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

ARTICLE IV-