24000325646

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

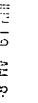
Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporation	ıs	
SUBJECT: 176 PRW LLC		
	(Name of Resulting Florida Limited Co	mpany)
	ersion, Articles of Organization, a a Limited Liability Company" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all correspondence	e concerning this matter to:	
Richard B. Becker		
(Contact	Person)	
176 PRW LLC		. 23
(Firm/Co	mpany)	
1311 SE 2nd Court		1024 JHN 19
(Addr	ress)	:
Fort Lauderdale FL 33301		
(City, State ar	nd Zip Code)	
9100@pobox.com		් ත ප
E-mail Address: (to be used for fu	ture annual report notifications)	
For further information concern	ning this matter, please call:	
Richard B. Becker	at ()_231-	6261
(Name of Contact Person)	(Area Code) (Da	ytime Telephone Number)
Enclosed is a check for the follo dollars and drawn on a bank loo		sed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 and Certification	Filing Fees	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	New Divis The C	Et Address: Filing Section Sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, 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: 176 PRW 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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
March 12, 2018
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: 176 PRW 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.

Signe	d this 16th	day of <u>June</u>	20 29	
<u>Signa</u>	ture of Autho	rized Representative of L	imited Liability Company	<u>K</u>
Signa Printe	ture of Author d Name: <u>Richa</u> r	ized Representative: Land B. Becker	1 Blunk Title: Member	
		alf of Other Business Entit		
Signat	ture:	Druken Borcker		
Printe	d Name: Rici	HAMA & BECKY	Title: M SM B &	1
Signat	ture:			
Printe	d Name:		Title:	
C:				
Signa: Printe	ture: d Name:		Title:	- · ·
THIC	d Name.		1 rdc.	
Signa	ture:			
Printe	d Name:		Title:	
C'				: : : : : : : : : : : : : : : : : : :
Signa Printe	ture: d Name:		Title:	
THIC	a ranic		r	
Signa	ture:			
Printe	d Name:		Title:	
If Flo	rida Corporat	tion:		
Signa	ture of Chairma	an, Vice Chairman, Director,		
If Dir	ectors or Office	ers have not been selected, ar	n Incorporator must sign.	
if Flo	rida Canaral I	Partnership or Limited Lia	hility Partnership	
	ture of one Ger		mity i ai thetamp.	
		Partnership or Limited Lia	bility Limited Partnership	<u>:</u>
Signa	tures of ALL	General Partners.		
Allot	hers:			
	ture of an autho	orized person.		
Fees:				
	Articles of C	Conversion:	\$25.00	
		rida Articles of Organizatio	•	
	Certified Co	ру:	\$30.00 (Optional)	
	Certificate of	of Status:	\$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

176 PRW LLC	
(Must contain the words "Li	mited Liability Company, "L.L.C.," or "LI.C.")
ARTICLE II - Address:	
	ss of the principal office of the Limited Liability Company is
B	
Principal Office Address:	Mailing Address:
1311 SE 2nd Court	1311 SE 2nd Court
1311 SE 2nd Court Fort Lauderdale FL 33301	1311 SE 2nd Court Fort Lauderdale FL 33301

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

Richard B. Becker		•	4 5 5
N	lame	٠.	
1311 SE 2nd Court		• .	19
Florida street address (P.O. Box NOT acceptable)		7.
Fort Lauderdale	FL ³³³⁰¹	٠.	Ċ
City	Zip		59

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-

Richard B. Becker

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

	Name and Address:	tle:
		MBR" = Authorized Member
		IGR" = Manager
	Richard B. Becker	1BR
	1311 SE 2nd Court	
	Fort Lauderdale FL 33301	
	David M. Ross	1BR
	43 Peninsula Road	
	Belvedere, CA 94920	
297		
	<u></u>	
S		
		
 CO		
СЛ	<u>.</u>	
99		se attachment if necessary)
		se actaenment it necessary)
		V: Other provisions, if any.
	Buk_	EQUIRED SIGNATURE:
er	authorized representative of a member	Signature of a member or a
	i section 605.0203 (1) (b), Florida Statutes. I am a	
	t to the Department of State constitutes a third deg	any false information submitted in a docum
1		This document is executed in accordance

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)