124/11/0380221

(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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08/27/24--01013--024 **150.00



COVER LETTER

TO:	New Filing S Division of C					
erm	BD DB	Lancaster LLC				
SUB	JECT:	(Name of Re	sulting Florida Limi	ted Cor	npany)	
			_	-	nd fees are submitted to conve accordance with s. 605.1045, I	
Pleas	e return all corr	espondence concernin	g this matter to:			
Jerem	ny Just					. 7.4 She
Black	tide Holdings, LL	(Contact Person)		-	G	2024 1
725 C	Cool Springs Blvd	(Firm/Company) ., Suite 600		•••		W6 27
Frank	lin, TN 37067	(Address)		-	<u>:</u>	2024 AUG 27 AH 11: 15
jerem	y@blacktideholdi	City, State and Zip Code)		-	r	- TE
E-1	mail Address: (to b	pe used for future annual re	port notifications)	-		
For fi	urther informati	on concerning this ma	tter, please call:			
Jerem	ny Just		818 at (497-7)	7990	
	(Name of Conta	act Person)	(Area Code) (Day	ytime Telephone Number)	
		for the following amou a bank located in the	` .	proces	sed by this office must be pay	able in US
(\$25 fo & \$12	50.00 Filing Fees or Conversion 5 for Articles (anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection Corporations 27		New Divis The C	t Address: Filing Section ion 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: BD DB Lancaster LLC #12.2 (CUDI) 5/9/6
(Enter Name of Other Business Entity)
Limited Liability Company
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) California
First organized, formed or incorporated under the laws of
First organized, formed or incorporated under the laws of
on
on
(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 19th day of August	
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Jeremy Just	Title: Managing Member
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: Jeremy Just	Title: Sole Member & Manager
•	
Signature:Printed Name:	Title:
Signature	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: 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.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty 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

	any is:	
BD DB Lancaster LLC		
(Must contain the words "Limited	Liability 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:	
3520 S. Ocean Blvd., A204	3520 S. Ocean Blvd., A204	.
South Palm Beach, FL 33480	South Palm Beach, FL 334	80
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Ag	ent's Signature:
The name and the Florida street address of Jeremy Just 3520 S. Ocean Blvd., A	of the registered agent are: Name	2024 AUG 27
The name and the Florida street address of Jeremy Just 3520 S. Ocean Blvd., A	of the registered agent are: Name	2024 AUG 27
The name and the Florida street address of Jeremy Just 3520 S. Ocean Blvd., A	of the registered agent are: Name 204	2024 AUG

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-

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	
AMBR & MGR	Jeremy Just
	3520 S. Ocean Blvd., A204
	South Palm Beach, FL 33480
	
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	202
(Use attachment if necessary)	UG 27 AH II: 15
(Ose attachment if necessary)	A. R
	<u> </u>
LE V: Other provisions, if any.	
	
REQUIRED SIGNATURE:	
MONATURE.	777
	· / C / //
	an authorized representative of a member
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo
as provided for in s.817.155, F.S.	ment to the Department of State constitutes a unite degree left
dene	ing of the
<u> </u>	rped or printed name of signee
I \	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)