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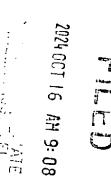
(Requestor's Name)
(Address)
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(nudress)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dustines E-M-M)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions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

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Gasparilla Ventures, LLC		
	of Resulting Florida Lim	nited Company)
		tion, and fees are submitted to convert an "Other sy" in accordance with s. 605.1045, F.S.
Please return all correspondence cond	cerning this matter to:	
Patrick Leahy		
(Contact Person))	_
Preti Flaherty		
(Firm/Company))	- .
PO Box 9546		
(Address)	- <u>-</u>	_
Portland, ME 04112		
(City, State and Zip C	Code)	_
pleahy@preti.com		
E-mail Address: (to be used for future an	inual report notifications)	_
For further information concerning th	nis matter, please call:	
Patrick Leahy	at (207)791-3117
(Name of Contact Person)	(Area Code	e) (Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located i		processed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)		ppy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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: Gasparilla Ventures, LLC M220(11x) 72.57
(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)
February 11, 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: Gasparilla Ventures, 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.



Signed this 1st	day of August	20 24
Signature of Auth	orized Representative o	f Limited Liability Company:
Signature of Author	orized Representative:	YKM /
Printed Name: Patri	ck Leahy	Title: Authorized Representative
	1 (
Signature(s) on be	helf of Other Business En	tity: [See below for required signature(s)]
Signature:		
Printed Name:	Putrick Leahn	Title: Authorized Representative
Signature:		
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
C: .		
Signature:		Tal
rimed Name		Title:
Signature:		
Printed Name:		Title:
		
Signature:		
Printed Name:		Title:
If Florida Corpora		0.07
	nan, Vice Chairman, Direct	
If Directors or Office	eers have not been selected	, an Incorporator must sign.
If Florido Conoral	Partnership or Limited I	iability Dautnouching
Signature of one Go		Liability Partnership:
orginature of one of	meral rathier.	
If Florida Limited	Partnership or Limited I	Liability Limited Partnership:
Signatures of ALL		<u>-</u>
All others:		
Signature of an auth	norized person.	
Fees:		

Articles of Conversion: \$25.00
Fees for Florida Articles of Organization: \$125.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Gasparilla Ventures, LLC	mited Liability Company, "L.L.C.," or "LLC.")
(with contain the words Li	anned Elabinty Company, E.E.C., or EEC.)
ARTICLE II - Address:	
The mailing address and street address	ss of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
16410 Gulf Shores Drive	PO Box 1946
Boca Grande, FL 33921	Boca Grande, FL 33921
Doca Grande, i L 3332 i	

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

C T Corporation System	
Na	me
1200 South Pine Island Roa	ad .
Florida street address (P	.O. Box NOT acceptable)
Plantation	FL 33324
City	Zip

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 of registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED) Donna Peterson-Riggs, Asst. Secretary

(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			
MGR	Richard H. Brown		
	16410 Gulf Shores Drive		
	Boca Grande, FL 33921		
MGR	Christine D. Brown		
	16410 Gulf Shores Drive	-	
	Boca Grande, FL 33921		
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(Use attachment if necessary)			
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ARTICLE V: Other provisions, if any.			
		,, ,	
REQUIRED SIGNATURE:			
0.0			
Signature of a member or a	n authorized representative of a	memher	

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.

Patrick Leahy	Y
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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)