# L24000494288

(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:
W24000124485 11/20/24

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2024 NOV 20 PM 7: 40
STATE ALLAHASSEE, FLORIDA

FILED NOV 20 PM 7: 40

### **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.

FIRST LEJEUNE PROPERTIES  (Enter Name of Other Business Entity)	<b>-</b> ·
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, comm	on law or business trust, etc.)
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the	- Cth
3/27/2017 On	aname of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Art FIRST LEJEUNE PROPERTIES, LLC	icles of Organization:
(Enter Name of Florida Limited Liability Company)	<b>-</b> •
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 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 dadocument's effective date on the Department of State's records.	90 calendar days after
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 appraisation which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S.	sal rights the amount to
	TALLAHASSEE, FI

Signed this	day of	_ 20			
Signature of A	Authorized Representative of Limi	ted Liability Company:			
Signature of A Printed Name: <u>I</u>	uthorized Representative:	Aitle: MANAGER	-		
		See below for required signature(s)			
Signature:	FRED A ZOROVICH	Title: GENERAL PARTNER	-		
			-		
Signature: Printed Name:_		_ Title:	_		
Signature:		Title:	_		
Printed Name:_		Title:	- -		
Signature:		Title:	_		
Signature: Printed Name:_		Title:	-		
	poration: nairman, Vice Chairman, Director, or G Officers have not been selected, an Ind				
	<mark>eral Partnership or Limited Liab</mark> ili e General Partner.	ty Partnership:	-		
	<u>ited Partnership or Limited Liabilit LL</u> General Partners.	ty Limited Partnership:	L'LLAH!	2024 NO	"T}
All others: Signature of an	authorized person.		AHASSEE. I	NOV 20 P	F
Fees:			CUFSTATE ELFLORIDA	PM 7: 40	$\subset$
Fees fo Certifie	s of Conversion: r Florida Articles of Organization: ed Copy: cate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	70 3.	04	

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
FIRST LEJEUNE PROPERTIES, LLC		
(Must contain the words "Limited Liability Con	ipany, "L.L.C.," or "L.L.C.")	
ARTICLE II - Address: The mailing address and street address of the princip	pal office of the Limited Liabil	lity Company is:
Principal Office Address: M	ailing Address:	
2033 West Mcnab Road #4 20	033 West McNab Road #4	
Pompano Beach, FL 33069 Po	ompano Beach, FL 33069	<del></del>
The name and the Florida street address of the regist  FREDRICK J. ZOROVICH  Name  2033 West McNab Road #4	tered agent are:	
Florida street address (P.O. Bo.	x NOT acceptable)	
Pompano Beach	FL <sup>33069</sup>	
City	Zip	
Having been named as registered agent and to acceliability company at the place designated in this registered agent and agree to act in this capacity, statutes relating to the proper and complete performancept the obligations of my position as register Registered Agent's Sugnatur (CONTINUE)	r certificate, I hereby accept the I further agree to comply with to the properties of my duties, and I am the greet as provided for in Charles (REQUIRED)	appointment as he provisions of all familiar with and

### ARTICLE IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	FREDRICK J. ZOROVICH	
	2033 West McNab Road #4	
	Pompano Beach, FL 33069	
MGR	FRED A. ZOROVICH	
	2033 West McNab Road #4	
	Pompano Beach, FL 33069	
		· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)		_
		<b>202</b>
		<u> </u>
ICLE V: Other provisions, if any.		2024 NOV
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		SE ( )
		<u> </u>
		H 7: 40 STATE LORIDA
REQUIRED SIGNATURE:		7: 40 TATE ORID!
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	Mon	
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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.

FREDRICK J. ZOROVICH

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)