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| (Re | equestor's Name) | |
|---|------------------|-----------|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PłCK-UP | MAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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DECRETARY OF STATE

DALLAHASSEE, FI CRIDE



April 7, 2022

CYNTHIA O'CONNELL 420 NORTH 2ND STREET FT PIERCE, FL 34950

SUBJECT: ADVENTURE RESORTS IN ME, L.L.C.

Ref. Number: L21000431656

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

It appears you are trying to convert a Florida LLC into a Florida CORPORATION. If this is correct, you have submitted an incorrect form. Please complete the enclosed, note the correct fees at the bottom of the form and return to our office for processing.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Darlene Connell Regulatory Specialist II Supervisor

Letter Number: 222A00008126

PILLED

SLOREJARY OF STATE

SLOREJARY OF STATE

COVER LETTER

New Filing Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

| SUBJECT: Adverture Resorts In Maine | |
|--|------|
| Name of Resulting Florida Profit Corporation | |
| The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligentity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S. | ible |
| Please return all correspondence concerning this matter to: | |
| Cynthia O' Conne!/ Contact Person | |
| Adventure Resorts in Maine Firm/Company | |
| 420 North 2nd Street Address | |
| Ft. Pierce FL 34950 | |
| City, State and Zip Code | |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Cyrthia O'Canell at (772) 332-888/ Name of Contact Person Area Code and Daytime Telephone Number Timouny O'Connell Enclosed is a check for the following amount: | |
| □ \$105.00 Filing Fees □\$113.75 Filing Fees and Certificate of Status □\$113.75 Filing Fees □\$122.50 Filing Fees, Certified Copy, and Certificate of Status | |
| Mailing Address: New Filing Section Street Address: New Filing Section | |

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

FILL D

| Signed this 27 day of April | . 20 2 2 | | |
|---|---|--|--|
| Required Signature for Florida Profit Corporati | | | |
| Signature of Director, Officer, or, if Directors or Of | fficers have not been selected, an Incorporator: | | |
| Printed Name: Grithia O'GnneltTitle: <u>General Partner Registered</u> agent | | | |
| | Florida partnerships, limited partnerships, and limited liabi | | |
| Printed Name Timotry J. O'Cornell | Title: General Ruther | | |
| Signature: | | | |
| Printed Name: | Title: | | |
| Signature: | | | |
| Printed Name: | Title: | | |
| Signature: | | | |
| Printed Name: | Title: | | |
| Signature: | | | |
| Printed Name: | Title: | | |
| Signature: | | | |
| Printed Name: | Title: | | |
| If Florida General Partnership or Limited Liab Signature of one General Partner. | ility Partnership: | | |
| If Florida Limited Partnership or Limited Liabi Signatures of <u>ALL</u> General Partners. | ility Limited Partnership: | | |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representative | | | |

Signature of an authorized person.

Fees:

Articles of Conversion:

\$35.00

Fees for Florida Articles of Incorporation:

\$70.00

Certified Copy:

\$8.75 (Optional)

Certificate of Status:

\$8.75 (Optional)

2022 MAY -4 PM 6: 08

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| The name of the corporation shall be: | re Resorts in Maine, Ire. |
|---|---|
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: | |
| Principal street address | Mailing address, if different is: |
| 420 North 2nd St Ft Pierce FL 34950 | SAME |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | Hal Paperties Hat are |
| ARTICLE IV SHARES | |
| The number of shares of stock is: ARTICLE V OFFICERS AND/OR DIRECTORS | |
| Name and Title: Cynthia D'Connell, Gen Paelne | Name and Title: |
| Address: 420 N 210 St Ft Pierre FC 34950 | Address: |
| Name and Title: Timothy D'Connell, General | Name and Title: |
| Address: 420 N 2nd St Ft Pierce FL 34950 | Address: Za |
| Name and Title: | Name and Title: |
| Address: | Address: Fig. 2 C |

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Cyrania O'Connell

Address: 420 NONN 2nd Street

Fortfierce FL 34950

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

Date

2022 MAY -4 PM 6:1