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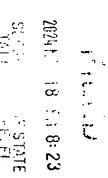
(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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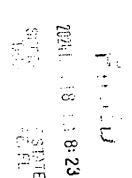


### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2024

JOHN MOEN 920A KENNEDY DRIVE KEY WEST, FL 33040 US

SUBJECT: ROBIN G NILSSON PA Ref. Number: W23000168101



We have received your document for ROBIN G NILSSON PA and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

#### L21000330769

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace Regulatory Specialist III

Letter Number: 624A00005792

Division of Connections D.O. DOV COOT Mellahaman Filmida COO1

## 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.

BUY SELL KEY WEST LLC
Enter Name of the Converting Entity  2. The converting entity is a LIMITED LIABILITY COMPANY
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of FLORIDA  (Enter state, or if a non-U.S. entity, the name of the country)
on 07/21/2021
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> ROBIN G NILSSON PA
Enter Name of Florida Profit Corporation
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.
5. If not effective on the date of filing, enter the effective date:  (The effective date: Cannot be prior to nor more than 90 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.



Signed this 20 day of MARCH	, <sub>20</sub> 24			
Required Signature for Florida Profit Corporation:				
Signature of Director, Officer, or, if Directors or Officer  ROBIN G NILS  Printed Name: PRE	12-			
Required Signature(s) on behalf of Converting Flor companies: [See below for required signature(s).]		d limited	liabilit	<u>ly</u>
Signature: Printed Name: ROBIN G NILSSON	Title: AUTHORIZED REF			
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 Liability Signature of one General Partner.	Partnership:		<i>(</i> )	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:	•	5	***.
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.			Ċυ	 
All others: Signature of an authorized person.		73.93 IGIS.	∷ 8: 23	•
Fees:  Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	mi	ယ	

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

	II PRINCIPAL OFFICE		
he principa	al place of business/mailing address is:		
333 FLEMINO	Principal street address	Mailing addre	ess, if different is:
KEY V	VEST FL 33040	KEY WEST	FL 33045-5239
LRTICLE	III PURPOSE		
lie purpos	e for which the corporation is organized is:		INO DUT NOT
	NY AND ALL LAWFUL PU	<del>.</del>	ING BUT NOT
LIMITE	ED TO REAL ESTATE SAL	_ES	
ARTICLE	IV SHARES 1000		
ARTICLE The number	TIV SHARES 1000		
he number	of shares of stock is:  V OFFICERS AND/OR DIRECTORS	3	
The number	of shares of stock is:  V OFFICERS AND/OR DIRECTORS Title:  ROBIN G NILSSON	Name and Title:	
The number $ARTICLE$	v of shares of stock is: 1000  V officers and/or directors  Title: PO BOX 5239		
The number	of shares of stock is:  V OFFICERS AND/OR DIRECTORS Title:  ROBIN G NILSSON	Name and Title:	S 2
The number  ARTICLE  Name and The Address:	v of shares of stock is: 1000  V OFFICERS AND/OR DIRECTORS  Title: ROBIN G NILSSON  PO BOX 5239  KEY WEST FL 33040	Name and Title:Address:	
The number  ARTICLE  Name and T  Address:	V OFFICERS AND/OR DIRECTORS Title: ROBIN G NILSSON PO BOX 5239 KEY WEST FL 33040	Name and Title:  Address:  Name and Title:	\$ 22
ARTICLE  Name and T  Address:	v of shares of stock is: 1000  V OFFICERS AND/OR DIRECTORS  Title: ROBIN G NILSSON  PO BOX 5239  KEY WEST FL 33040	Name and Title:  Address:  Name and Title:	
The number  ARTICLE  Name and The second of	V OFFICERS AND/OR DIRECTORS Title: ROBIN G NILSSON PO BOX 5239 KEY WEST FL 33040	Name and Title:  Address:  Name and Title:  Address:	2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
The number ARTICLE  Name and The Address:  Name and The Address:	v of shares of stock is:  v of FICERS AND/OR DIRECTORS  Title: ROBIN G NILSSON  PO BOX 5239  KEY WEST FL 33040  Title:	Name and Title:  Address:  Name and Title:  Address:	2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3

### ARTICLE VI REGISTERED AGENT

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

Name:

**ROBIN G NILSSON** 

Address:

333 FLEMING STREET

KEY WEST FL 33040

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

M. M. M. Required Signature/Registered Agent

March 28, 2024