

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert a "Florida Limited Liability Company" into an "Other Business Entity" pursuant to section 605.1045, Florida Statutes. This form is basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23) a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fee: \$25.00

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

For further information, you may contact the Registration Section at (850) 245-6051.

Important Notice: As a condition of conversion, pursuant to s.605.0212(10), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

CR2E106 (05/17)

COVER LETTER

TO:	Registration Division of C			
SUBJ	ECT:			
		Name of Florida	Limited Liability Company	ý
Limit			ee(s) are submitted to c r Business Entity" in a	
Please	e return all corr	espondence concernin	g this matter to:	
		Contact Person		
		Firm/Company		
		Address		
	(City, State and Zip Code		
E	-mail address: (to	be used for future annual i	report notification)	
For fu	ırther informati	on concerning this ma	tter, please call:	
	I CC + P		at () Area Code and Day	e militari
Ν	Vame of Contact P	erson	Area Code and Day	time Telephone Number
Enclo	sed is a check	for the following amou	ant:	
□ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

CR2E106 (05/17)

Articles of Conversion

For

Florida Limited Liability Company

Into

"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:				
Enter Name of Florida Limited Liability Company				
2. The name of the "Converted or Other Business Entity" is:				
Enter Name of "Converted or Other Business Entity"				
3. The "Converted or Other Business Entity" is a				
organized, formed or incorporated under the laws of				
The formation document is attached (if applicable).				
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.				
5. This conversion shall be effective in Florida on: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date of the conversion under the laws governing the "Other Business Entity.")				

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.

	Department of State n 605.0117 and Chapter	-	ed on the department pursuant to
Street	Address:		
Mailin	g Address:		
app		at to which such members	ed to pay any members having are entitled under ss. 605.1006
Signed thisda		_day of	, 20
Signat	ure:	Лust be signed by a Member or Au	thorized Representative
Printed	l Name:	Title:	
Fees:	Filing Fee: Certified Copy:	\$25.00 \$30.00 (Optional)	

6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to

a.) Lists the following street and mailing address of an office the Florida

transact business in Florida, the "Converted or Other Business Entity":

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