# L25000002176

| (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  |
|   |
|   |
|   |
|   |

Office Use Only



900436268469

## Sunshine State Corporate Compliance Company

### 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

| DATE 01/03/2025     | _   |                        | *******       | . F3.700       |
|---------------------|---|------------------------|---------------|----------------|
|                     |   |                        | <b>~</b> WALK | . <i>L</i> V** |
| ENTITY NAME Smoal   | Citrus Development, LLC   |                        | 2025          |                |
|                     |   |                        | <u> </u>      | *1<br>* ;      |
| DOCUMENT NUMBER     |   | ·                      | (S            | <del></del> ,  |
|                     | **PLEASE FILE THE ATTACHED AN                                       | VO RETURN**            |               |                |
| xxxxxxxx            | Plain Copy  |                        |               |                |
|                     | Certified Copy  |                        |               |                |
|                     | Certificate of Status   |                        |               |                |
|                     | Certified Copy of Arts & Amendments<br>Certificate of Good Standiny |                        |               |                |
|                     | **APOSTILLE' / NOTARIAL CERT  | TIFICATION**           |               |                |
| COUNTRY OF DESTINA  |   |                        |               |                |
| NUMBER OF CERTIFICA | ATES REQUESTED  |                        |               |                |
| TOTAL OWED \$150.0  | 00 ACC  | COUNT #: I20160000072  | 2             |                |
|                     |   | S 8 FM                 |               |                |
| Please call Tina at | the above number for any issues or c                                | concerns. Thank you so | much!         |                |

#### Articles of Conversion

For

#### "Other Business Entiry"

into

#### Florida Limited Liability Company

|   | 2027                          |
|---|-------------------------------|
| The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to cor<br>"Other Business Entity" into a Florida Limited Liability Company in accordance wi     |                               |
| Statutes.   | 1<br>/3                       |
|   |                               |
| I. The name of the "Other Business Entity" immediately prior to the filing of the Article Smoak Citrus Development  | es of Conversion is:          |
| (Enter Name of Other Business Entity)   |                               |
| 2. The "Other Business Entity" is a general partnership   |                               |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common  | n 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  |                               |
| (Enter state, or if a non-U.S. entity, the  | name of the country)          |
| January 26, 2016  |                               |
| (date of organization, formation or incorporation)  |                               |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Artic   | cles of Organization:         |
| Smoak Citrus Development, 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.)  | *11 1 16 1                    |
| <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records. | will not be listed as the     |
| 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 appraisa   | al rights the amount to       |

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

\$5.00 (Optional)

Certificate of Status:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Smoak Citrus Dev  | velopment, LLC   |  |         |
|---|--|--|---------|
| (   | Must contain the words "Limited Li-  | ability Company, "L.L.C.," or "LLC.")  |         |
| ARTICLE H - A   |  | e principal office of the Limited Lia  |         |
| Principal Office  | Address:   | Mailing Address:   | 2025 .: |
| 1025 County Roa   | d 17 N   | 1025 County Road 17 N  | :       |
|   | 13953  | Lake Placid, FL 33852  |         |
| (The Limited Liability                                      | Registered Agent, Registe  | ered Office, & Registered Agent's tegistered Agent. You must designate an individ                            |         |
| ARTICLE III - (The Limited Liability business entity with a | Registered Agent, Registe  | ered Office, & Registered Agent's egistered Agent. You must designate an individ                             |         |
| ARTICLE III - (The Limited Liability business entity with a | Registered Agent, Registe<br>Company cannot serve as its own R<br>an active Florida registration.)<br>e Florida street address of t<br>John F. Smoak, III                    | ered Office, & Registered Agent's egistered Agent. You must designate an individ                             |         |
| ARTICLE III - (The Limited Liability business entity with a | Registered Agent, Registe<br>Company cannot serve as its own R<br>an active Florida registration.)<br>e Florida street address of t<br>John F. Smoak, III                    | ered Office, & Registered Agent's tegistered Agent. You must designate an individ                            |         |
| ARTICLE III - (The Limited Liability business entity with a | Registered Agent, Register Company cannot serve as its own Han active Florida registration.)  e Florida street address of the John F. Smoak, III  Note 1025 County Road 17 N | ered Office, & Registered Agent's tegistered Agent. You must designate an individ                            |         |
| ARTICLE III - (The Limited Liability business entity with a | Registered Agent, Register Company cannot serve as its own Han active Florida registration.)  e Florida street address of the John F. Smoak, III  Note 1025 County Road 17 N | ered Office, & Registered Agent's registered Agent You must designate an individual he registered agent are: |         |

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

|   | 150 | <br>~ . | Ľ   | /     |
|---|-----|---------|-----|-------|
| • | K"  | <br>CI  | . r | 1 V - |

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

| "AMBR" = Authorized Member   | Name and Address:  |
|--|--|
|  |  |
| "MGR" = Manager<br>MGR   | Edward L. Smoak, Jr.   |
| MGR  | 1025 County Road 17 N  |
|  | Lake Placid, FL 33852  |
|  | Eake Flacid, FE 33032  |
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| (Use attachment if necessary)  LE V: Other provisions, if any.  REQUIRED SIGNATURE:  |  |
| LE V: Other provisions, if any.  |  |
| REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance  | an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware ment to the Department of State constitutes a third degree fe |
| REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance any false information submitted in a document. | an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware nent to the Department of State constitutes a third degree fe |

Filing Fees
S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)