LZ5000048913



(Requestor's Name)
(Address)
, , ,
(Address)
(Address)
(City/State/Zip/Phone #)
<u> </u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Linuty Ivalite)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
M5200011055
7016

Office Use Only



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01/24/25--01001--016 **150.00

25 JAN 24 MM 2: 59



January 29, 2025

. . . .

CJ CERAVOLO 32 N GOULD ST. SHERIDAN, WY 82801 US

SUBJECT: SEA SIDE TOWING LLC Ref. Number: W25000011022

We have received your document for SEA SIDE TOWING LLC and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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.

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.

Letter Number: 225A00001867

Matthew H Hitchcock Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	New Filing S				
	Division of C	Corporations			
SUBJI	ECT: Sea Sid	e Towing LLC			
		(Name of Re	sulting Florida Limi	ted Cor	npany)
The en Busine	closed Article ss Entity" into	es of Conversion, Artico o a "Florida Limited L	eles of Organizati iability Company	on, ar	nd fees are submitted to convert an "Other eccordance with s. 605.1045, F.S.
Please	return all corr	espondence concernin	g this matter to:		
Cj Cera	avolo				
		(Contact Person)		-	
NIp Ma	stercorp Inc				
-		(Firm/Company)		-	
32 N G	ould St.				
•		(Address)		-	
Sherida	an, WY 82801				
	(City, State and Zip Code)		-	
seaside	etowing850@gr	mail.com			
E-ma	ail Address: (to b	e used for future annual re	port notifications)	•	
For fur	ther informati	on concerning this ma	tter, please call:		
Cj Cera	volo		_at (<u>850</u>	243	5183
	(Name of Conta	act Person)	(Area Code)	(Day	rtime Telephone Number)
Enclose dollars	ed is a check f and drawn on	or the following amou a bank located in the	ınt: (All checks p United States)	roces	sed by this office must be payable in US
(\$25 for	.00 Filing Fees Conversion for Articles ization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing So Division of C P.O. Box 632	ection orporations		New I Divisi	t Address: Filing Section ion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, Fl. 32314

Articles of Conversion

l or

"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.

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
(Enter entity type. Example: corporation, 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 08/16/2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Sea Side Towing LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 1/15/2025
(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.)
Note: If the date inserted in this block does not meet the applicable statutory fiting requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 13	Bth day of January	20 <u>.2\$</u>			
Signature of Authorized Representative of Limited Liability Company:					
Signature of A	Authorized Representative:				
Printed Name:	Cj Ceravolo	Title: President			
Trinted Name.	1	Tide:			
Signature(s) o	n behalf of Other Business Entity	[See below for required signature(s)]			
		[See Delivit for required signature(8)]			
Signature:					
Printed Name:	O Ceravolo	Title: President			
•	OLCeravolo				
Signature:					
Printed Name:		Title:			
Signature:					
Printed Name:		Title:			
Signature:					
Printed Name:		Title:			
Signature:					
Printed Name:		Title:			
e:					
Signature:		and the same of th			
Printed Name:		Title:			
If Florida Cor	-nomition:				
	hairman, Vice Chairman, Director, o	r Officer			
	Officers have not been selected, an I				
n Directors of	officers have not been selected, and	neorporator must sign.			
If Florida Ger	neral Partnership or Limited Liabi	lity Partnership:			
·	ne General Partner.				
<i>9</i>					
If Florida Lin	<u>nited Partnership or Limited Liabi</u>	lity Limited Partnership:			
	ALL General Partners.				
All others:					
Signature of ar	authorized person.				
<u>Fees:</u>					
	es of Conversion:	\$25.00			
	or Florida Articles of Organization:				
	ed Copy:	\$30.00 (Optional)			
Certifi	cate of Status:	\$5.00 (Optional)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Sea Side Towing LLC	
(Must contain the words "Limited Liability Compa	any, "L.L.C" or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the principal	I office of the Limited Liability Company is:
Principal Office Address: Mai	iling Address:
221 Carol Ave Nw Fort Walton Beach, FL 32548 221	Carol Ave Nw Fort Walton Beach, F
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own Registered Agents) business entity with an active Florida registration.)	ent. You must designate an individual or another
The name and the Florida street address of the register	red agent are:
Wallace Docuprep	
Name	
1992 Lewis Turner Blvd Suite #1403	
Florida street address (P.O. Box	NOT acceptable)
Fort Walton Beach	32547
City	Zip
Having been named as registered agent and to acceptionability company at the place designated in this configuration and agree to act in this capacity. If a statutes relating to the proper and complete perform accept the obligations of my position as registered. Registered Agent's Signature (ertificate, I hereby accept the appointment as wrther agree to comply with the provisions of all nance of my duties, and I am familiar with and

(CONTINUED)

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

"AMRR" = Authorizad Mansha	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	AN . AA	
AMBR	NIp Mastercorp Inc	
	32 N Gould St	_
	Sheridan WY \$2801	
MGR	Cj Ceravolo	
	221 Carol Ave	
	Fort Walton Beach, FL 32548	
		
		<u> </u>
(Use attachment if necessary)		
CLE V: Other provisions, if any. stercorp Inc owns 100% of Seaside Towi	ng LLC.	
CLE V: Other provisions, if any, stercorp Inc owns 100% of Seaside Towi	ng LLC.	
CLE V: Other provisions, if any. stercorp Inc owns 100% of Seaside Towi	ing LLC.	

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)