

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership pursuant to section 620.2104, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 620.2102(1), F.S., an organization other than a domestic limited partnership may convert to a Florida limited partnership.

Filing Fees: \$52.50 Certificate of Conversion

\$1,000 Florida Certificate of Limited Partnership (includes \$965 filing fee and \$35 registered agent

designation fee)

Certified Copy (optional): \$52.50

Certificate of Status

(**Optional**): \$8.75

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: If the conversion involves a limited liability company, pursuant to 605.0212 (10), F.S. each party to the conversion must be active and current through December 31st of the calendar year the conversion is being submitted to the Department of State for filing.

CR2E112 (7/17)

COVER LETTER

SUBJECT: Name of Resulting Florida Limited Partnership or Limited Liability Limited Partnership The enclosed Certificate of Conversion, Certificate of Limited Partnership, and fees are submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S. Please return all correspondence concerning this matter to: Contact Person
Name of Resulting Florida Limited Partnership or Limited Liability Limited Partnership The enclosed Certificate of Conversion, Certificate of Limited Partnership, and fees are submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S. Please return all correspondence concerning this matter to:
Name of Resulting Florida Limited Partnership or Limited Liability Limited Partnership The enclosed Certificate of Conversion, Certificate of Limited Partnership, and fees are submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S. Please return all correspondence concerning this matter to:
submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S. Please return all correspondence concerning this matter to:
submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S. Please return all correspondence concerning this matter to:
Limited Liability Limited Partnership in accordance with s. 620.2104, F.S. Please return all correspondence concerning this matter to:
Please return all correspondence concerning this matter to:
Contact Person
Contact Person
Contact Person
Firm/Company
Address
City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at ()
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$1,052.50 Filing Fees □ \$1,061.25 Filing Fees □ \$1,105.00 Filing Fees □ \$1,113.75 Filing
Fees, (\$52.50 for Conversion and Certificate of and Certified Copy Certified Copy, and
and \$1,000 – Certificate) Status Certificate of Status
Mailing Address: Street Address:
Registration Section Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certificate of Conversion

For

"Other Business Organization"

Into

Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion <u>and attached Certificate of Limited Partnership</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:					
(Enter Name of Other Business Entity)					
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)					
first organized, formed or incorporated under the laws of					
(Enter state, or if a non-U.S. entity, the name of the country)					
on (Enter date "Other Business Entity" was first organized, formed or incorporated)					
3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership :					
(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)					
4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.					
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.)					
6. The conversion is permitted by the applicable law(s) governing the other business entity and the other business entity complies with such law(s) in effecting the conversion.					

7. The "Other Business Entity" currently exists on the official records of the jurisdiction

under which it is currently organized, formed or incorporated.

Signed	d this	day of		20	0	·	
Partne that th	ership/Limite e facts stated i	d Liability Limi	Listed in Attached ted Partnership: Incare true. Any false in: 7.155, F.S.	livid	lual(s) sign	ning affirm	
Signati Printed	ure: 1 Name:		Title:				
Signati Printed	ure: 1 Name:		Title:				
Signati Printed	ure: 1 Name:		Title:				
Signate Printed	ure: 1 Name:		Title:				
Signate Printed	ure: 1 Name:		Title:				
Signate Printed	ure: 1 Name:		Title:				
that th	e facts stated	in this document	Other Business Entity are true. Any false in 7.155, F.S. [See below	ıforn	nation cor	nstitutes a t	hird
Signati Printed	ure: 1 Name:		Title:				
Signati		n, Vice Chairman	, Director, or Officer. elected, an Incorporat	or m	ust sign.		
	rida General F ure of one Gen	_	mited Liability Partr	iersk	up:		
		Liability Compan er or Authorized I	-				
All oth Signati	ners: ure of an autho	orized person.					
Fees:		da Certificate of I Filing Fee and \$3 by:	Limited Partnership: 35 Filing Fee)	\$ \$1, \$ \$	52.50 ,000.00 52.50 (O 8.75 (O	Optional) Optional)	

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

1
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
2.
Street address of initial designated office
3.
Name of Registered Agent for Service of Process
4
Florida street address for Registered Agent
5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.
Signature of Registered Agent
6.
Mailing address of initial designated office
7. If limited partnership elects to be a limited liability limited partnership, check box □.

Page 1 of 2

8. Name and business address	s of each ge	neral partner: <u>Business Address:</u>
Name:		Dusiliess Address.
Signed this	day of	·
Signature of each general part this document are true. Any fa provided for in s.817.155, F.S	alse informa	dual(s) signing affirm(s) that the facts stated in tion constitutes a third degree felony as