

841536
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN
HCF REALTY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 DEC 20 PM 2:48

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Corporate Filing Menu

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12/20/2012
T. LEMMON
12/20/2012
CORAMND

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

844536

(Document number of corporation (if known))

1. HCF REALTY, INC.
(Name of corporation as it appears on the records of the Department of State)

2. MICHIGAN 3. 11/06/1979
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

TEXAS

This filing is to be effective as of 12-31-2012

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Harvey C. Fruehauf
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

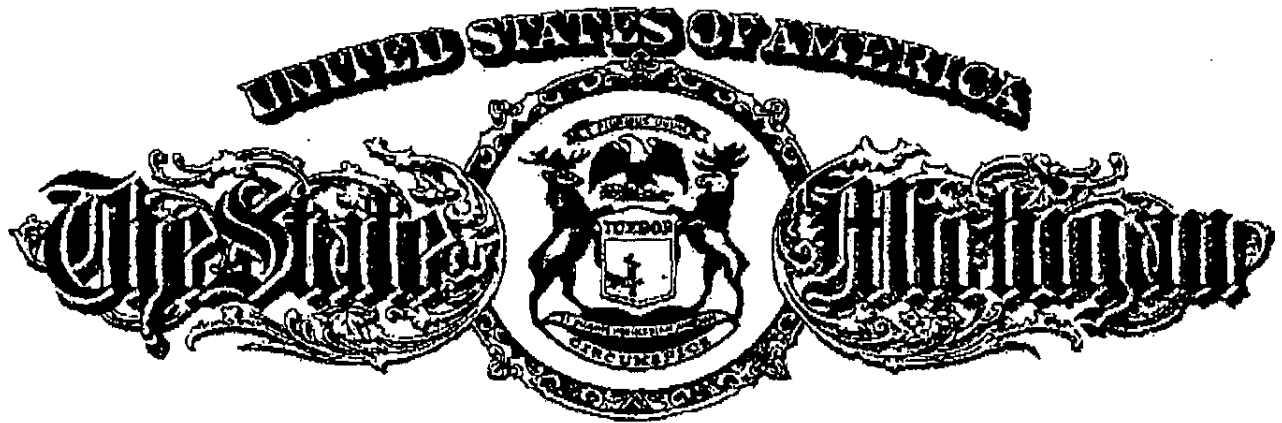
HARVEY C. FRUEHAUF, JR.

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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SECRETARY OF STATE
ATLANTA, FLORIDA



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify that the annexed copy has been compared by me with the record on file in this Department and that the same is a true copy thereof.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 20th day of December, 2012

[Signature] Director

Bureau of Commercial Services

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MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMERCIAL SERVICES	
Date Received DEC 11 2012	(FOR BUREAU USE ONLY) FILED DEC 12 2012
This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.	

Name HABEEB I. GNAIM		
Address 1300 SMITH STREET, SUITE 1400		
City HOUSTON	State TEXAS	ZIP Code 77002

Administrator
BUREAU OF COMMERCIAL SERVICES

EFFECTIVE DATE: *December 31, 2012*

Document will be returned to the name and address you enter above. If left blank, document will be returned to the registered office.

CERTIFICATE OF CONVERSION
For use by a Corporation Converting into a Business Organization

Pursuant to the provisions of Act 294, Public Acts of 1972 (profit corporations) and Act 25, Public Acts of 1993 (limited liability companies), the undersigned corporation executes the following Certificate of Conversion.

1. Before Conversion

Entity Name: HCF REALTY, INC.		Entity ID: 070624
Indicate (X) Entity Type	<input checked="" type="checkbox"/>	Domestic Profit Corporation
	Street Address, if different than the one provided in Item 3:	
	<input type="checkbox"/>	Foreign Corporation

2. After Conversion

Entity Name: HCF REALTY, INC.		
Indicate (X) Entity Type	<input type="checkbox"/>	Domestic Profit Corporation
	<input checked="" type="checkbox"/>	Foreign Corporation
	<input type="checkbox"/>	Domestic Limited Liability Company
	<input type="checkbox"/>	Foreign Limited Liability Company
If the converting corporation is a domestic corporation that has not commenced business, has not issued any shares, and has not elected a Board of directors, proceed to Item 6.		
If the converting corporation has commenced business, proceed to Item 3.		

10000 VSH 163712

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3. Surviving Business Organization

Governing Statute: TEXAS BUSINESS ORGANIZATIONS CODE
Street Address: 3601 KIRBY DR., SUITE 1200, HOUSTON, TEXAS 77019
Principal Place of Business: 3601 KIRBY DR., SUITE 1200, HOUSTON, TEXAS 77019

4. Shares

Designation and number of outstanding shares in each class or series	VOTING COMMON - 2,625 SHARES
Indicate class or series of shares entitled to vote	VOTING COMMON
Indicate class or series entitled to vote as a class	VOTING COMMON
If the number of shares is subject to change prior to the effective date of the conversion, the manner in which the change may occur is as follows:	

5. The terms and conditions of the proposed conversion, including the manner and basis of converting the shares of the converting corporation into the shares of the converted entity.

EACH SHARE OF ISSUED AND OUTSTANDING COMMON STOCK IN THE CONVERTING CORPORATION SHALL CONVERT INTO A SHARE OF COMMON STOCK IN THE CONVERTED CORPORATION.
THERE ARE NO ISSUED AND OUTSTANDING SHARES OF PREFERRED STOCK IN THE CONVERTING CORPORATION AT THE TIME OF FILING THIS CERTIFICATE OF CONVERSION.

6. (Complete only if an effective date is desired other than the date of filing. The date must be no more than 90 days after the receipt of this document in the office.)

The conversion is effective on the 31ST day of DECEMBER, 2012

The plan of conversion will be furnished by the surviving business organization, on request and without cost, to any shareholder of the converting corporation.

The conversion is permitted by the law that will govern the internal affairs of the business organization after conversion and the surviving business organization complies with that law in converting.

SHMO-P-00-001 CT 5/08/08

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7. The assumed names being transferred to continue for the remaining effective period of the Certificate of Assumed Name on file prior to the conversion are:

Assumed Name	Expiration Date

8. The converting corporation's name and/or assumed name(s) to be used as new assumed name(s) of the surviving business organization:

Assumed Name

9. Signatures: Complete only Section (a), (b), or (c)

Complete if the Corporation has not commenced business:

a) The plan of conversion was approved by unanimous consent of the incorporators of the converting domestic corporation and the corporation has not yet commenced business, has not issued shares, and has not elected a board of directors in accordance with Section 745(1)(d) of the act.

Signed this _____ day of _____

(Signature of incorporator)

(Type or Print Name)

(Signature of incorporator)

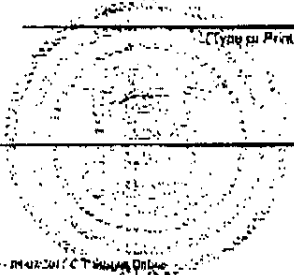
(Type or Print Name)

(Signature of incorporator)

(Type or Print Name)

(Signature of incorporator)

(Type or Print Name)



STATE OF CONNECTICUT

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Complete if the Corporation has commenced business:

b) The plan of conversion was adopted by the Board of Directors and approved by the shareholders of the Domestic Corporation in accordance with Section 745(1)(c) of the Act.

Signed this 5TH day of DECEMBER 2012

By Harvey C. Truhalup, Jr.
(Signature of Authorized Officer or Agent)

HARVEY C. TRUHALUP, JR., PRESIDENT

(Type or Print Name)

Complete only if the converting corporation is foreign:

c) The plan of conversion was adopted and submitted for approval in the manner required by the law governing the internal affairs of the converting foreign corporation.

Signed this _____ day of _____

By _____
(Signature of Authorized Officer or Agent)

(Type or Print Name)



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