L19000232475

(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:
1119-82966
<u> </u>

Office Use Only



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Off Book Cartherine ** Take

2019 SEP 24 AM 11: 31 SECRETARY OF SEATE TALLAHASSEE, FLORIBA

COVER LETTER

TO:	New Filing So Division of Co				
CHRII	ECT: Hourglass	Homes, LLC			
30131	<u></u>	(Name of Res	ulting Florida Limite	ed Com	ipany)
					d fees are submitted to convert an "Othe cordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this matter to:		
Peter D	uke				
		(Contact Person)			
Hourgl:	ass Homes				
.		(Firm/Company)	-		
1900 Ci	urry Ford Rd				
		(Address)			
Orlando	o, FL 32806				
	((City, State and Zip Code)			
	avo@gmail.com				
E-m	ail Address: (to b	e used for future annual re	port notifications)		
For fu	rther informati	on concerning this ma	tter, please call:		
Peter D	uke		_at (252-4	556
-	(Name of Conta	et Person)	(Area Code)	(Day	time Telephone Number)
		or the following amou a bank located in the		rocess	sed by this office must be payable in US
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New F Division Clifton 2661 F	ET ADDRESS iling Section on of Corporate Building Executive Cent	ions er Circle	New Fi Division P. O. Bo	ling Son of Cox 632	orporations

INHS11 (7/17)

Articles of Conversion

For

"Other Business Entity"

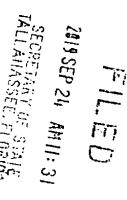
Into

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.

1. The name of the Hou glass Homes, Inc.	"Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
Hourglass	(Enter Name of Other Business Entity)
2. The "Other Busi	ness Entity" is a Corporation ness Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
	med or incorporated under the laws of
1/1/2019	
(date of organization	on, formation or incorporation)
3. The name of the	Florida Limited Liability Company as set forth in the attached Articles of Organization:
Hourglass Homes, LLC	
	(Enter Name of Florida Limited Liability Company)
4. If not effective of	on the date of filing, enter the effective date:
(The effective date the date this docur Note: If the date insert	e: Cannot be prior to date of receipt or filed date nor more than 90 calendar days afterment is filed by the Florida Department of State.) ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the atte on the Department of State's records.
5. The plan of conv	ersion has been approved in accordance with all applicable statutes.
6. The "Converted of	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 27th day of August	20_19
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Peter Duke	Title: Dilo
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: / Dt Duke Printed Name: Peter Duke	Tille:President
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	me:			
The name of the L	imited Liabilit	y Company is	:	
Hourglass Homes, LI	l.C			
(M	ust contain the word	ds "Limited Liabil	ity Company, "L.L.C.,"	or "LLC.")
ARTICLE II - Ao The mailing addre		idress of the p	orincipal office of	the Limited Liability Company is:
Principal Office	Address:		Mailing Addr	ess:
1900 Curry Ford Rd			1900 Curry Ford	Rd
Orlando, FL 32806		<u>-</u>	Orlando, FL 3280	
1				
The name and the	Florida street a			re:
		Nan	ne	
	1900 Curry For	rd Rd		
	Florida stree	et address (P.0	O. Box NOT acce	ptable)
	Orlando		FL 32806	
		City	Zip)
liability com registered agent statutes relatir	pany at the plac t and agree to a ng to the proper	ce designated in this capa and complete	in this certificate, l wity. I further agre performance of m	of process for the above stated limited I hereby accept the appointment as see to comply with the provisions of all by duties, and I am familiar with and provided for in Chapter 605, F.S

(CONTINUED)

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

"A MARK" = A DINOCIZED MEMBER	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	6 D. I
MGR	Peter Duke
	1900 Curry Ford Rd
	Orlando, FL 32806
(Use attachment if necessary)	
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	t Dalu
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	r an authorized representative of a member to with section 605.0203 (1) (b), Florida Statutes. I am aware the teament to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a doc	r an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am aware that the degree felority is the degree felority in the degree felority in the degree felority is the degree felority in the degree felority in the degree felority is the degree felority in the degree felority in the degree felority is the degree felority in the degree felority in the degree felority in the degree felority is the degree felority in the
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document of the provided for in s.817.155, F.S. Peter Duke	ce with section 605.0203 (1) (b), Florida Statutes. I am aware that

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)