A2300000581

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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DATE:

11/15/2023

NAME:

HERMOSA NFTM 41, LTD.

TYPE OF FILING: CONVERSION

COST:

1,061.25 - CHECK ATTACHED

RETURN: Plan copy 3- Good Standing Please!

ACCOUNT FCAUDO00015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Hermosa NFTM 41, Ltd.	
Name of Resulting Florida Limited Parts	nership or Limited Liability Limited Partnership
The enclosed Certificate of Conversion, Certific submitted to convert an "Other Organization" in Limited Liability Limited Partnership in accord	nto a Florida Limited Partnership or
Please return all correspondence concerning thi	s matter to:
REHANA LADHA	
Contact Person	
NELSON MULLINS	
Firm/Company	
390 NORTH ORANGE AVENUE	
Address	
SUITE 1400	_
City, State and Zip Code	······································
REHANA.LADHA@NELSONMULLINS.COM	
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter,	please call:
REHANA LADHA	t (<u>407</u>) <u>6694264</u>
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
S1,052.50 Filing Fees Fees. (\$52.50 for Conversion and \$1,000 - Certificate) \$\infty\$ \$\inft	☐ \$1,105.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations 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 and attached Certificate of Limited Partnership 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:				
HERMOSA NFTM 41. LLC				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY				
(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				
on				
3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:				
HERMOSA NFTM 41, LTD.	-m			
(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: 11/14/2023 (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.)				

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

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.

under which it is currently organized, formed or incorporated.

	this 14TH day of NOVEMBER	2	20 <u>23 </u> .	
Partne that the degree	ture of Each General Partner Listed in Attached ership/Limited Liability Limited Partnership: In e facts stated in this document are true. Any false in felony as provided for in s.817.155, F.S.	divi	dual(s) signing affirm	(s) ird
	ire: 1000.77			
Printed	Name: Marcus D. Goodson Title	: Pre	sident	
Signatu Printed	re:Title			
Signati	ire.			
Printed	Name:Title	:		
	ire:			
Printed	Name:Title	:		
	ire:			
Printed	Name:Title:	:		
	ıre:			
DIEHIAU				
Printed Requir	Name: Title: red Signature(s) on behalf of Other Business Entity	<u>v:</u> Ir	ndividual signing affi	ms
Printed Requir that the degree	Name: Title: red Signature(s) on behalf of Other Business Entity e facts stated in this document are true. Any false in felony as provided for in s.817.155, F.S. [See below	<u>y:</u> Ir nforr	ndividual signing affirmation constitutes a the	ms nird
Printed Requir that the degree Signatu	Name: Title: red Signature(s) on behalf of Other Business Entity e facts stated in this document are true. Any false in	<u>y;</u> Ir nform v for	ndividual signing affir nation constitutes a the required signature(s).	ms nird
Printed Requir that the degree Signatu Printed If Flori Signatu If Direct If Flori	Name: Title: red Signature(s) on behalf of Other Business Entity e facts stated in this document are true. Any false in felony as provided for in s.817.155, F.S. [See below are:	y; Ir nforr v for <u>Mar</u> or m	ndividual signing affirmation constitutes at the required signature(s).	ms nird
Printed Requir that the degree Signatu Printed If Flori Signatu If Direct Signatu Signatu	red Signature(s) on behalf of Other Business Entity e facts stated in this document are true. Any false in felony as provided for in s.817.155, F.S. [See below are: Name: Michael Allan Title: are of Chairman, Vice Chairman, Director, or Officer. stors or Officers have not been selected, an Incorporate and General Partnership or Limited Liability Partnership.	y; Ir nforr v for <u>Mar</u> or m	ndividual signing affirmation constitutes at the required signature(s).	ms nird
Printed Requir that the degree Signatu Printed If Flori Signatu If Elori Signatu If Flori Signatu All othe	red Signature(s) on behalf of Other Business Entity of facts stated in this document are true. Any false in felony as provided for in s.817.155, F.S. [See below are: Name: Michael Allan Title: Ida Corporation: are of Chairman, Vice Chairman, Director, or Officer. actors or Officers have not been selected, an Incorporate and General Partnership or Limited Liability Partners of one General Partner. Ida Limited Liability Company: Tree of a Member or Authorized Representative.	y; Ir nforr v for <u>Mar</u> or m	ndividual signing affirmation constitutes at the required signature(s).	ms nird

Signed this 14TH day of NOVEMBER	20 <u>23</u> .
Signature of Each General Partner Listed in Attacl Partnership/Limited Liability Limited Partnership that the facts stated in this document are true. Any fals	: Individual(s) signing affirm(s)
degree felony as provided for in s.817.155, F.S.	
Signature:	
Printed Name: Marcus D. Goodson T	itle: President
Signature:	
Printed Name: T	itle:
Signature:	
Printed Name:T	itle:
Signature:	
Signature: T	itle:
	
Signature:T	itle.
Signature:T	
Printed Name:T	itle:
degree felony as provided for in s.817.155, F.S. [See bignature:	elow for required signature(s).]
Printed Name: Michael Allan T	itle: Manager
If Florida Corporation:	· · · · · · · · · · · · · · · · · · ·
Signature of Chairman, Vice Chairman, Director, or Offi	
f Directors or Officers have not been selected, an Incorp	orator must sign.
If Florida General Partnership or Limited Liability P Signature of one General Partner.	artnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
•	
All others: Signature of an authorized person.	
Eees:	
Certificate of Conversion:	\$ 52.50
Fees for Florida Certificate of Limited Partnershi	
(\$965 Filing Fee and \$35 Filing Fee) Certified Copy:	\$ 52.50 (Optional)
Certificate of Status:	\$ 8.75 (Optional)

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

Hermosa NFTM 41, Ltd.
(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. 2700 Westhall Lane, Suite 200 Street address of initial designated office Maitland, Florida 32751
Street address of initial designated office
Maitland, Florida 32751
3. DDER Holdings, LLC
Name of Registered Agent for Service of Process
4. 2700 Westhall Lane, Suite 200
Florida street address for Registered Agent
Maitland, Florida 32751
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. Deion R. Lowery, Manager
Deion R. Lowery, Manager Signature of Registered Agent
55
Mailing address of initial designated office
Maitland, Florida 32751
7. If limited partnership elects to be a limited liability limited partnership, check box \(\Pi\).

Page 1 of 2

Name:	Business Address:
Rivers Edge North, Inc.	14170 Warner Circle
	Fort Myers, Florida 33903
	
· · · · · · · · · · · · · · · · · · ·	
Signed this 14 th day of 1	November, 2023.
his document are true. Any false informa	lual(s) signing affirm(s) that the facts stated in ation constitutes a third degree felony as
provided for in s.817.155, F.S.	
tivers Edge North Inc., a Florida ot-for-profit corporation	
· Man, H	
Marcus D. Goodson, President	