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·
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: WBF FAMILY MO	ORTGAGE, LLC Limited Company)
The enclosed Certificate of Conversion, Articles of convert an "Other Business Entity" into a "Florida accordance with s. 608.439, F.S.	
Please return all correspondence concerning this n	natter to:
LUANN S WESTERMAN (Contact Person)	
WBF FAMILY MORTGAGE, LL (Firm/Company)	.C
4377 JUNIPER TERRACE (Address)	
BOYNTON BEACH, FL. 33 (City, State and Zip Code)	<u>436</u>
For further information concerning this matter, ple	ease call:
LUANN "LON" WESTERMAN at (5) (Name of Contact Person)	561 531 - 376 6 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:	(
	10.00 Filing Fees Sertified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314
Tallahassee FL 32301	•



Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this
Certificate of Conversion is: WESTERMAN LUANN Sylvester DBA WBF FAMILY MORTGAGE
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>SOLE PROPRIETORSHIP</u> . (Enter entity type. Example: corporation, limited partnership, sole proprietorship, 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 August 28, 2003.
(Enter date "Other Business Entity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
FLORIDA.
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
WBF FAMILY MORTGAGE, LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)

Page 1 of 2

5. If not effective on the date of filing, enter the effective date:	01	2007
(The effective date: 1) cannot be prior to nor more than 90 days a	ifter f h	e date this
document is filed by the Florida Department of State; AND 2) mu	st be t	he same as the
effective date listed in the attached Articles of Organization, if an	effecti	ve date is
listed therein.)		

Signed this 22 day of OctoBER 20 07

Signature of Authorized Person:

Printed Name: <u>LUANN S WESTERMIN</u>Title: <u>OWNER / MGRM</u>

Fees:

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WBF	FAMILY	MORTGAGE, LLC bility Company," the abbreviation "L.L.C	•
Must end with the	words "Limited Lia	pility Company," the abbreviation "L.L.C	.," or the designation
'LLC.")			
ARTICLE II -	· Address:		
The mailing ad	dress and stree	t address of the principal office	of the Limited
Liability Comp			

Principal Office Address:	Mailing Address:
4377 JUNIPER TERRACE	4377 JUNIPER TERRACE
BOYNTON BEACH, FL. 33436	BOYNTON BEACH, FL. 33436

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

LUANN	S. L	JES:	TERM	IAN
4377	Juni	Name	Ter	RACE
Florida stre	et addres	s (P.O.	Box NO	OT acceptable)
BOYNTON	BEA	CH,	FL	33436
	Cit	v State	and 7	in

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter, 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2 07 OCT 29 PM 12: 49

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	LUANN S. WESTERMAN 4377 JUNIPER TERRACE BOYNTON BEACH, FL 33436
	,
	(Use attachment if necessary)

REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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)