# 100031616

(Requestor's Name)
(Address)
(
(Address)
(City/State/Z <sub>I</sub> p/Phone #)
(1,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Bocament Nambor)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

S. HAWKES MAR 3 1 2009 **EXAMINER** 



300147877973

04/02/09--01001--002 \*\*155.00

#### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Home Town Properties of usa & (Name of Resulting Florida Limited Company)	3c			
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.				
Please return all correspondence concerning this matter to:				
Contact Person)  Homotoun Properties of USA Inc.  (Firm/Company)				
400 Capital circle 5, E Suite 18269 (Address)				
Tallahastae Fla 32301-3839 (City, State and Zip Code)				
For further information concerning this matter, please call:				
Daw Kalicki   at (850) 508 3503     (Name of Contact Person)   (Area Code and Daytime Telephone Number)				
Enclosed is a check for the following amount:				
(\$25 for Conversion and Certificate of and Certified Copy Certified Copy	0 Filing Fees, Copy, and e of Status			
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS Registration Section Division of Corporation Division of Corporation P. O. Box 6327 Tallahassee, FL 32314	ns			

#### **Certificate of Conversion**

For

### "Other Business Entity"

"Other Business Entity" Into	
Into  Florida Limited Liability Company  PR  This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability	•
T 1 11 CON 420 TH 11 Oct 4	は 一
The name of the "Other Business Entity" immediately prior to the filing of this Properties of USA Two Portion (Enter Name of Other Business Entity)	11
2. The "Other Business Entity" is a <u>Corporation, limited partnership, sole proprietorship,</u> (Enter entity type. Example: corporation, limited partnership, sole proprietorship,  general partnership, common law or business trust, etc.)	
(Enter state, or if a non-U.S. entity, the name of the country)	
(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:	
The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
Home Fown Properties of usa 28 C (Enter Name of Florida Limited Liability Company)	
The effective date: 1) cannot be prior to nor more than 90 days after the date this locument is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is	

listed therein.)

Signed this 154 day of Ay	inl 2009.	
Signature of Member or Authorized		ity Company:
Signature of Member or Authorized R Printed Name: <u>Charles FDavi</u>	Representative: Title: Mar	
Signature(s) on behalf of Other Busin	_	
Signature:		
Printed Name: Charles E. Dau	Title: PLPS	
Signature:		
Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	·····
		2 <u>2</u>
Signature:Printed Name:	Title:	Pro R T
		> Concern
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	<del>20 &gt; ω</del>
		DA DA
If Florida Corporation: Signature of Chairman, Vice Chairman, If Directors or Officers have not been se		
If Florida General Partnership or Lin Signature of one General Partner.	nited Liability Partnership:	
If Florida Limited Partnership or Lin Signatures of ALL General Partners.	nited Liability Limited Partnership:	<u> </u>
All others: Signature of an authorized person.		
Fees:		
Certificate of Conversion:	\$25.00	

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	-1
Home Town Propertie	es of us n date 3
(Must end with the words "Limited Liability Company," the abbe "LLC.")	reviation "L.L.C.," or the designation of the desig
ARTICLE II - Address:	
The mailing address and street address of the pri Liability Company is:	Section of the Limited Section 1997
Principal Office Address:	Mailing Address:
729 COLLINSFORD RODD	HOOCapitalcircle SE suite18269 Tallahassee F132301-3839
ADTICLE III Degistered Agent Degistered	Office & Desigtand Agent's

## 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:

Oaniel C. Kalieki

4068 Desoto Farm Rd

Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32309
City, State, and Zip

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..

Oniel C Kaliki

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

#### 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	Charles E Davis or 2032 Hill N Dalp Dr N Tall shassee F1 32317
	OS APR
	ASSEE, FLO
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the of the effective date: 1) cannot be prior to not document is filed by the Florida Department the effective date listed in the attached Cedate is listed therein.)	(OPTIONAL) or more than 90 days after the date this t of State; <u>AND</u> 2) must be the same as
REQUIRED SIGNATURE:	
Signature of a member or an autl	horized representative of a member.
of this document constitutes an affi	08(3), Florida Statutes, the execution rmation under the penalties of perjury ted herein are true.)
Charles	E, Davis 37 ed name of signee
Typed or printe	ed name of signee

#### 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)