## L09000097771

(Requestor's Name)  (Address)	600161231396
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	10/08/0901013013 **155.00  FALLAHAS
(Document Number)  Certified Copies Certificates of Status Special Instructions to Filing Officer:	RY OF STATE SEE, FLORIDA

Office Use Only

## **COVER LETTER**

TO: Registration S Division of C	orporations			
SUBJECT:	TURN-KEY	PRPERTY NE	Twokh UC	
	(Name of Resulting	Florida Limited Company)		
	isiness Entity" into a "	ticles of Organization, Florida Limited Liabil	and fees are submitted to ity Company" in	
Please return all corre	espondence concerning	g this matter to:		
	AVID HOLT	_		
1480	(Contact Person)	ERTY NETWOR	K	
(Contact Person)  1 URN-KEY PROPERTY NETWORK  (Firm/Company)				
5351	GODSREY PA	<u>e</u>		
Park	GODSREY PA	33067		
(0	City, State and Zip Code)			
•				
	on concerning this mat	-		
DAVIO HO	CT	at (561 ) 57	13 - 3485 ytime Telephone Number)	
(Name of Conta	ct Person)	(Area Code and Da	ytime Telephone Number)	
Enclosed is a check for the following amount:				
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS	<b>5</b> :	MAILING A		
Registration Section		Registration S		
Division of Corporations		Division of C P. O. Box 632		
Clifton Building 2661 Executive Center	er Circle	Tallahassee, F		
Tallahassee, FL 3230		i ananassee, i		

# FILED 09.0CT -8 PM 2: 10 SECRETARY OF STATE FALLAHASSEE, FLORIDA

-52156

## 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.

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:     URN-KEY Property NETWORK, INC.   (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of
on <u>une 15</u> 2009 (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:
4. The name of the Florida Limited Liability Company as set forth in the attached  Articles of Organization:    LIRN-KEY PROPERTY NETWORK LLC  (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liaming Company)
5. If not effective on the date of filing, enter the effective date:  (The effective date: 1) cannot be prior to nor more than 90 days after the date this document 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 5 TA day of OCTOBER	
Signed this 3 day of UC16BEX	200_9
Signature of Member or Authorized Represent	ative of Limited Liability Company:
Signature of Member or Authorized Representativ	e:
Signature of Member or Authorized Representative Printed Name: DAVIP HOLL	_ Title: MANAGING MEMBEL  50LE MEMBER
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:  Printed Name:  Avio Hout	
Printed Name: DAVID HOLD	Title: PRESIDE NT
Signature	SOLE OWNEL
Signature:Printed Name:	Title:
Signature: Printed Name:	Tida
Frinted Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Cian atoms	
Signature:Printed Name:	Title:
If Florida Corporation:	O.C.
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
2.1.01.01.0 0.1 0.11.01.0 1.01.0 1.01.0 1.01.0 1.01.0 1.01.0 1.01.0 1.01.0 1.01.0 1.01.0 1.01.0 1.01.0 1.01	or portation in the origin.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Certificate of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of Liability Company is:	the principal office of the Limited
Principal Office Address:	Mailing Address:
S351 GODFREY ROAD PARKLAND, FC 33067	P.O. BOX 970522 COCONUT CREEK FL 33097-0522 ATTN: DAVID HOLT
ARTICLE III - Registered Agent, Regis	tered 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:

Name
S351 Gooffeey Road
Florida street address (P.O. Box NOT acceptable)

Parkhavo FL 33667

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.

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:

Name and Address:
DAVID HOLT 535/ GOPFREY ROAD
TARRIAND, FL. 3306+
<u> </u>
(Use attachment if necessary)
Lange CCP
date of filing: (OPTIONAL) 🗖 👝
or more than 90 days after the Tate the to to to to the the the the to the
rtificate of Conversion, if an Effective
SEE SE
of ST
TATI
norized representative of a member.
08(3), Florida Statutes, the execution
rmation under the penalties of perjury
ed herein are true.)
11P HOLT
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)