# 110000095934

(Requestor's Name)		
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PICK-UP		MAIL
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Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Officer:	
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Office Use Only



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EXAMINER

SEGRETARY OF STATE

### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT:	EMORAN	PROPERT, Florida Limited Company)	its LLC	
	(Name of Resulting)	Florida Limitéd Company)		
	siness Entity" into a "l	icles of Organization, a Florida Limited Liabili		tted to
Please return all corre	espondence concerning	g this matter to:		
LARR	(Contact Person)  PROPE (Firm/Company)	eties but c		
	(i in in Company)			
dou / RI	9 (Address)	3 W 1"		
A. TAMO	ote Springs City, State and Zip Code)	FL 32701		
	when the state and zip Code;  WE TO See used for future annual ref			
E-mail Address: (to b	e used for future annual rep	fort notifications)		
For further information	on concerning this mat	ter, please call:		
LARKY (Name of Conta	Add Ar 10th	at ( 467 ) .5 (Area Code and Day	29565/ vtime Telephone Num	iber)
·	or the following amou		•	·
(\$25 for Conversion & \$125 for Articles	155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	\$185.00 Filing Fe Certified Copy, and Certificate of Status	
of Organization)  STREET ADDRESS	z <b>.</b>	MAILING A	nnpree.	2010 SI SECR
Registration Section	<b>3</b> 4	Registration S		
Division of Corporati	ions	Division of C		ARY SSE
Clifton Building		P. O. Box 632		[T]
2661 Executive Center	er Circle	Tallahassee, F		
Tallahassee, FL 3230	01			
				A Marian

### **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: $A \cap Q \cap A$
(Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Partnership.  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
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)
(Enter state, or if a non-U.S. entity, the name of the country)  on $1-29-2009$
(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:
N/A BE €
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SEMORAN PROPERTIES LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability 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 7 Th day of SEPTEMBE	CH 20 10 .	
Signature of Member or Authorized Represent	ative of Limited Liability Co	mpany:
Signature of Member or Authorized Representative Printed Name: LARRY Adrins	e:	Din
Signature(s) on behalf of Other Business Entity:	[See below for required signat	ture(s).]
Signature: Larry adking		
Printed Name: LARRY Adkins	Title: MBRM	
Signature: B. J. Quin.		
Signature: Brinn Adkins	Title: MARM	
Signature:		
Signature:Printed Name:		
Signature:Printed Name:		
Printed Name:	Title:	
Signature:Printed Name:		
Printed Name:	Title:	
Signature:Printed Name:		
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:	7. 2
TE Manida I imited Danta ambia and imited I inhibit	4 Y ::4 J D4	2010 S SEOF
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	E C
All others:		SEN 3
Signature of an authorized person.		(T)
Fees:		PM 18: 18 BF STATE E, FLORIDA
Certificate of Conversion:	\$25.00	•
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
SEMBRAN PRODER	Vier 120
(Must end with the words "Limited Liability Company," the abb	reviation "L.L.C.," or the designation
ARTICLE II - Address:	
The mailing address and street address of the pri Liability Company is:	ncipal office of the Limited
Principal Office Address:	Mailing Address:
206 TRANGUILTY COVE	SAME
ALTA MONTE SPAINS  FL 32701	
ADTICLE III Desistened Agent Designand	Office & Desistand Agent's
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Registerindividual or another business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
LARRY A.	drine
Name  ACC TOANGELL IV.C.	TASEC 2010
Florida street address (P.O.	Box NOT acceptable)
Altanonte Speins	Box NOT acceptable)  FL 3270/  , and Zip
Cíty, State	, and Zip
hereby accept the appointment as registered capacity. I further agree to comply with the protect the proper and complete performance of my disaccept the obligations of my position as registed Chapter 608, F.S.	accept service of process for the accept service of process for the accept service in this certificate, I accept and agree to act in this ovisions of all statutes relating to attest, and I am familiar with and stered agent as provided for in S
Registered Agent's Sig	gnature (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	Name and Address:
"MGRM" = Managing Member	
MSEM	Jarry affine 206 + RANGUILITY CONS ALTA MINES SER 1855, FL 327
MSORM	109 Rockland Circle CARY NC 27519
	(Use attachment if necessary)
ument is filed by the Florida Departm	(OPTIONAL) o nor more than 90 days after the date this ment of State; AND 2) must be the same as Certificate of Conversion, if an effective STATE STAT
Jarin (	Jan P
Signature of a member or an a	authorized representative of a member
of this document constitutes an a	8.408(3), Florida Statutes, the executions affirmation under the penalties of perjury stated herein are true.)
Typed or pri	inted 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)

Page 2 of 2