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(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Na	me)
(Doc	cument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	
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12 MAR 19 AH 10: 00 SECRETARY OF STATE

B. BOSTICK
MAR 2 0 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Shingle Creek Pastur	res, LLC			
	of Resulting Florida Lin	nited Company)		
The enclosed Certificate of Conversion, "Other Business Entity" into a "Florida I Please return all correspondence concern	Limited Liability Co			
Shirley Brunet				
(Contact Person)				
The Landon Companies				
(Firm/Company)				
21 E Long Lake Road, Suite 100				
(Address)				
Bloomfield Hills, MI 48304			SE 38	12
(City, State and Zip Code	e)		LARC ARC	12 HAS
sjbrunet@landoncompanies.com			AS	Report From Total
E-mail address: (to be used for future annual repo	ort notifications)		m	***************************************
For further information concerning this r	natter, please call:		ir si Fli	
Shirley Brunet	at (_248	642-0190	FLORID	
(Name of Contact Person)	(Area Code	and Daytime Telephone Number		_
Enclosed is a check for the following am	ount:			
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fea and Certified Copy			
STREET ADDRESS:	MAILI	NG ADDRESS:		
· · ·		ation Section		
•		n of Corporations		
Clifton Building 2661 Executive Center Circle	P. O. Bo	ssee, FL 32314		
Tallahassee, FL 32301	i attatia:	330C, (L 32314		

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> 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: Shingle Creek Pastures Limited Partnership A070009	ンン	
(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.)		
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 July 31, 2007		
(Enter date "Other Business Entity" was first organized, formed or incorporate	d)	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the which it is now organized, formed or incorporated:	121	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Shingle Creek Pastures, LLC (Enter Name of Florida Limited Liability Company)	9	
Shingle Creek Pastures, LLC	:0	O
(Enter Name of Florida Limited Liability Company)	15	
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 of State; AND 2) must be the same as the effective date I attached Articles of Organization, if an effective date is listed therein.)		
6. The conversion is permitted by the applicable law(s) governing the other business entity and conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the	l the conver	sion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

\$30.00 (Optional)

\$5.00 (Optional)
Page 2 of 2

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limite	ed Liability Comp	pany is:	
		_	
Shingle Creek F	'astures, LLO	ry, the abbreviation "L.L.C" or the designation "LLC.")	
(,		y	
ARTICLE II - Addre			
The mailing address an	id street address o	of the principal office of the Limited Liabili	ity Company is:
Principal Office Addr	ess:	Mailing Address:	
3431 Pine Ridge Road		3431 Pine Ridge Road	
Suite 101		Suite 101	
Naples, FL 34109		Naples, FL 34109	
The name and the Flori	ida street address Jon Parrish	of the registered agent are: Name	12) SEC
	3431 Pine Ri	idge Road, Suite 101	MAR 19 CRETARY LAHASSEE
		address (P.O. Box NOT acceptable)	SSEE. OF A
<u> </u>	Naples	FL 34109	D)FS
		City, State, and Zip	AH 10: 15 OF STATE E. FLORID.
company at the place de agree to act in this capa proper and complete pe	esignated in this co acity. I further agr erformance of my c	and to accept service of process for the above ertificate. I hereby accept the appointment a ree to comply with the provisions of all statuduties, and I am familiar with and accept the for in Chapter 608, F.S	e stated limited liability as registered agent and ates relating to the
		(CONTINUED)	

Page 1 of 2

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MGRM	Daniel J. Aronoff, Trustee of the Daniel J. Aronoff Living Trust
	12 MAR 19 AM SECREJANY OF TAGLAHASSES. F
(Use attachment if necessary)	AM IO: 15 FLORIDA
ARTICLE V: Effective date, if oth	
(The effective date: 1) cannot be p the Florida Department of State; Certificate of Conversion, if an effe	rior to nor more than 90 days after the date this document is filed by AND 2) must be the same as the effective date listed in the attached
REQUIRED SIGNATURE:	
Signature of a member	or an authorized representative of a member.
the penalties of perjury that the fact	8(3), Florida Statutes, the execution of this document constitutes an affirmation under its stated herein are true. I am aware that any false information submitted in a true constitutes a third degree felony as provided for in s.817.155, F.S.)
Danie	el J. Aronoff Typed or printed name of signee