L14000028680

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer. Rej. Letter of 9/28/13-Never Previoled. — Doc. arguted and Previoled. — Doc. arguted and Prignal date of fecupt honored as filed date

Office Use Only



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09/20/13---01006---021 **185.00

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SECRETARY OF SAIR

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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 23, 2013

ZAKKIYYAH T. WHITE 9900 W. SAMPLE ROAD, SUITE 300 CORAL SPRINGS, FL 33065

SUBJECT: FOUR SEASONS REALTY SERVICES, LLC

Ref. Number: W13000052702

We have received your document for FOUR SEASONS REALTY SERVICES, LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must state the effective date of the conversion. The effective date cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date of the conversion under the laws governing the other business entity.

This document was received on 09/20/13.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 913A00022291

District of Community D.O. DOV 6297 Mallalance District 6291

COVER LETTER

Division of Corporations	
SUBJECT: Four Seasons Realty	Services, LLC
	of Resulting Florida Limited Company)
	Articles of Organization, and fees are submitted to convert an Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concern	ning this matter to:
Zakkiyyah T. White	
(Contact Person)	
Four Seasons Realty Services	
(Firm/Company)	
9900 W. Sample Rd., Suite 300	
(Address)	
Coral Springs, FL 33065	
(City, State and Zip Code	e)
ztwhiteesq@aol.com	
E-mail address: (to be used for future annual repo	ort notifications)
For further information concerning this r	natter, please call:
Zakkiyyah T. White	at (561) 289-1023
(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 Fees and Certified Copy \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314

Tallahassee, FL 32301

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED 13 SEP 20 # 8 29' SECRETARY OF STATE TALL AT A TENTH

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: Four Seasons Realty Services, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
(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 August 3, 2005 (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:
Four Seasons Realty Services, LLC
(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.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

Signed this 13th day of September	20 <u>13</u>
Individual signing affirms that the facts sta	resentative of Limited Liability Company: nted in this document are true. Any false information
constitutes a third degree felony as provide	
Signature of Member or Authorized Representation Name: Zakkiyyah T. White	entative: Title: MGR
this document are true. Any false informat s.817.155, F.S. [See below for required sign	ntity: Individual(s) signing affirm(s) that the facts stated in ion constitutes a third degree felony as provided for in ature(s).
Signature: Name: Zekkiyyah T. White	Title: P
Printed Name:	Title:
Printed Name:	Title:
Signature:	Title:
Signature: Printed Name:	Title:
Signature:	Title:
-	Title.
If Florida Corporation: Signature of Chairman, Vice Chairman, Direct If Directors or Officers have not been selected	
If Florida General Partnership or Limited	
Signature of one General Partner.	
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Four	Seasons	s Realtv	/ Services	LL
			Company, the abbrevia	

The name of the Limited Liability Company is:

ARTICLE II - Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Addre	ess:	Mailing Address:		
9900 W. Sample Rd.		9900 W. Sample Rd.		
Suite 300		Suite 300		
Coral Springs, FL 33065		Coral Springs, FL 33065		
(The Limited Liability Company business entity with an active F	y cannot serve as its own Registered A	fice, & Registered Agent's Signa Agent. You must designate an individual or an tered agent are:	13 SEP	-:-1
	Zakkiyyah T. White		53	(
		me	Stranger Stranger Stranger	
	9900 W. Sample Rd	Suite 300	 ငှာ	
	Florida street address (P.C		(D)	
_	Coral Springs	FL 33065		
	City, Stat	e, 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

<u>Title:</u> "MGR" = Manager	<u>Nam</u>	e and Address:
"MGRM" = Managing	Member	Zaxxiyyah T. White
MGR		9900 W. Sample Rd.
		Suite 300
		Coral Springs, FL 33065
(Use attachment if nece	ssary)	
		e date of filing:
ICLE V: Effective date, effective date: 1) canno lorida Department of S ficate of Conversion, if	if other than the the prior to no state; <u>AND</u> 2) is an effective date	e date of filing: (OPTIONAL) or more than 90 days after the date this document is filed by must be the same as the effective date listed in the attached te listed therein.)
ICLE V: Effective date, effective date: 1) canno	if other than the the prior to no state; <u>AND</u> 2) is an effective date	or more than 90 days after the date this document is filed by must be the same as the effective date listed in the attached
ICLE V: Effective date, effective date: 1) canno lorida Department of S ficate of Conversion, if UIRED SIGNATURE:	if other than the the prior to no state; AND 2) is an effective date.	or more than 90 days after the date this document is filed by must be the same as the effective date listed in the attached te listed therein.)
ICLE V: Effective date, effective date: 1) canno lorida Department of S ficate of Conversion, if UIRED SIGNATURE:	if other than the the prior to no state; AND 2) is an effective date.	or more than 90 days after the date this document is filed by must be the same as the effective date listed in the attached
ICLE V: Effective date, effective date: 1) canno lorida Department of S ficate of Conversion, if UIRED SIGNATURE: Signature of a month of the penalties of perjury that	if other than the temperature of the prior to no state; AND 2) is an effective day an effective day ember or an authomorphism of the facts stated he	or more than 90 days after the date this document is filed by must be the same as the effective date listed in the attached te listed therein.)
effective date: 1) canno lorida Department of Signature of a modulus of the penalties of perjury that document to the Department	if other than the temperature of State; AND 2) is an effective date of State of State constitute the facts stated her tof State constitute.	or more than 90 days after the date this document is filed in must be the same as the effective date listed in the attached its listed therein.) Torized representative of a member. a Statutes, the execution of this document constitutes an affirmation uncrein are true. I am aware that any false information submitted in a