L1400057141

(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:
Please mail out

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SECRETARY OF STATE
OF A PROPERTY.

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	THE HE	MOTIN EESTIRE of Resulting Florida Limite	d Company)	
	· · · · · · · · · · · · · · · · · · ·	-	d fees are submitted to coccordance with s. 605.10	
Please return all corre	espondence concerning	g this matter to:		
JER	CONTACT PERSON)			
THE HAM	TIN RESTORE (Firm/Company)	, W.		
1734 PINT	EHVEST De . (Address)			
WESTPALM	OFACH, FU City, State and Zip Code)	33407		
HAMPTINSHEU	PINSHAND (0 SN c used for future annual rep	oort notifications)		
For further information	on concerning this mat	ter, please call:		
VERRY HAM (Name of Contact	ot Person)	at ((Area Code) (Day	13-2149 nime Telephone Number)	
Enclosed is a check for	or the following amou	nt:		3.5 2
\$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	S185.00 Filing Fees, Certified Copy, and Certificate of Status	JIL ÉPR -7
STREET ADDRESS	5:	MAILING A		OF STA
Registration Section Division of Corporati	ons	Registration S Division of C		* 27 VATE VEHE/
Clifton Building		P. O. Box 632	27	7
2661 Executive Cente	er Circle	Tallahassee, l	FL 32314	

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity) 2. The "Other Business Entity" is a CAPOPATION
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of FURIDA (Enter state, or if a non-U.S. entity, the name of the country)
on 09 14 10 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
THE HAMPTON RESTORE, LLC.
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: 1) cannot be prior to date of receipt or filed date 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.)
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Page 1 of 2

BECHTIANY OF STATE

1			
Signed this 315T. day of MARCH	20 14		
Signature of Authorized Representative of Limi			
Signature of Authorized Representative: Printed Name: VACAPLO TPMOTON	Title: VICE PRESIDENT		
Signature(s) on behalf of Other Business Entity:			
Signature: Printed Name: NECON HAMPTON	Title: PLESIDENT		
Signature:Printed Name:	Title:		
Signature:Printed Name:			
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:		
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.			!
<u>Fees:</u>			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	ARY OF STAT ASSESSED THE	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
1734 PWEHVEST De. 2171 OAKMUNT DE. WEST PALM BEACH, PL 33404 EVVIERA CHACH, FL 33404
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:
WERRY HAMPTON
Florida street address (P.O. Box NOT acceptable)
WEST PAUN BEACH FL 33407 City 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 605, F.S.
Registered Agent's Signature (REQUIRED)
(CONTINUED)
(CONTINUED)
Page 1 of 2

Company:		
Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager	han Homond	
mc 2	1734 PINEHIRST DE.	
	WEST PALM BEARY PL 33417	
DMD0	Japuaga Hamman	
Пиос	1819 BAI JIMORE AVE 14-165	
	KANSAS CITY, MO 104.108	
	•	
an effective date is listed, the date mus	the date of filing: (OPTIONAL) st be specific and cannot be more than five business days	prio
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The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-