

#L14000070555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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04/11/14--01030--026 **150.00

05/01/14--01012--001 **5.00

FILED
2014 APR 25 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
MAY -1 2014

[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
14 APR 28 AM 11:48
DIVISION OF STATE
TALLAHASSEE, FLORIDA

April 14, 2014

PINONICHOLSON, PLLC
LAURENCE J PINO, ESQ.
189 S ORANGE AVE, STE. 1650
ORLANDO, FL 32801

SUBJECT: TUSCAN GARDENS, LLC
Ref. Number: W14000023496

We have received your document for TUSCAN GARDENS, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 914A00007964

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tuscan Gardens, LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Laurence J. Pino, Esq.

(Contact Person)

PinoNicholson, PLLC

(Firm/Company)

189 S. Orange Ave., Suite 1650

(Address)

Orlando, FL 32801

(City, State and Zip Code)

pbarnett@pinonicholsonlaw.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Paula Barnett

at (407) 956-4245

(Name of Contact Person)

(Area Code)

(Daytime 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:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

PINO NICHOLSON
A Commercial Law & Business Consulting Firm

FILED
2014 APR 25 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 22, 2014

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Tuscan Gardens, Inc.
Ref. Number: W14000012496

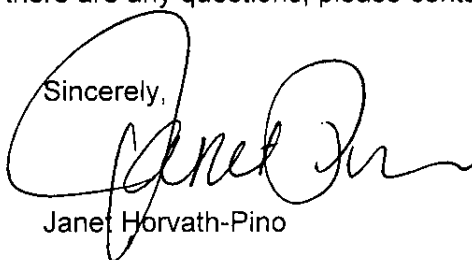
Dear Sir/Madam:

Because it has been brought to our attention that we must first file an annual report for Tuscan Gardens, Inc. before it can be converted to an LLC, we have chosen to let Tuscan Gardens, Inc. dissolve and to simply file for Tuscan Gardens, LLC.

Enclosed please find Articles of Organization along with a check in the amount of \$5.00 to supplement the \$150.00 check that was previously submitted with the conversion documents. This is to cover the fees associated with filing Articles of Organization and to a Certified Copy for Tuscan Gardens, LLC.

Thank you for your assistance. If there are any questions, please contact me.

Sincerely,



Janet Horvath-Pino

JHP/pb

Enclosures: Original letter from Florida Department of State dated April 14, 2014 including attachments which include the Articles of Organization for Tuscan Gardens, LLC;
Check #4002 for \$5.00.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Tuscan Gardens, LLC

(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:

189 S. Orange Ave., Suite 1650
Orlando, FL 32801

Mailing Address:

P.O. Box 1511
Orlando, FL 32802

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:

Laurence J. Pino, P.A.

Name

189 S. Orange Ave., Suite 1650

Florida street address (P.O. Box **NOT** acceptable)

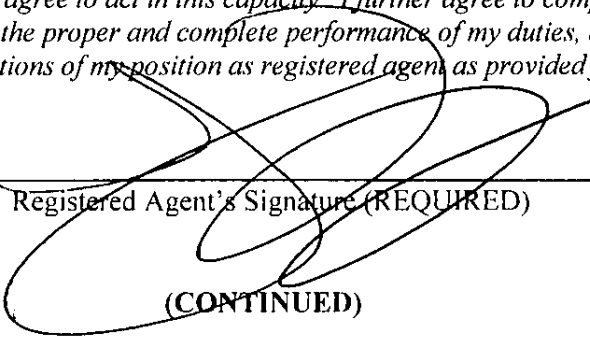
Orlando

City

FL 32801

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)

FILED
2014 APR 25 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Tuscan Gardens Management Corporati
189 S. Orange Ave., Suite 1650
Orlando, FL 32801

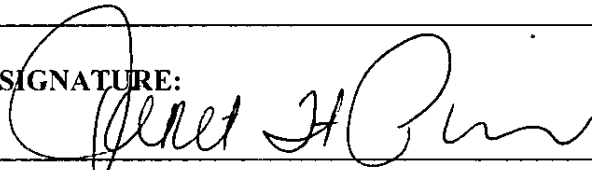
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Janet Horvath-Pino

Typed or printed 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)