L1400096310

(Re	equestor's Name)	
(Ac	ldress)	
(Ác	ldress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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JUN 16 2014 D. BRUCE

W14-15380

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 3, 2014

BRENDAN WALKER 2651 HOPE ST SARASOTA, FL 34231

SUBJECT: GUMTREE PROPERTIES, LLC

Ref. Number: W14000015380

We have received your document for GUMTREE PROPERTIES, 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):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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

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

Deborah Bruce Regulatory Specialist II 1 JUN 13 PM 4:21

Letter Number: 214A00011898



May 1, 2014

BRENDAN WALKER 2651 HOPE ST SARASOTA, FL 34231

SUBJECT: GUMTREE PROPERTIES, LLC

Ref. Number: W14000015380

We have received your document for GUMTREE PROPERTIES, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The fees to file the Certificate of Conversion and Articles of Organization total \$150.00 (\$25 filing fee for the Certificate of Conversion, \$100 filing fee for the Articles of Organization, and \$25 for the Registered Agent Designation). Enclose an additional \$30 for each certified copy requested and an additional \$5 for each certificate of status requested.

There is a balance due of \$45.00.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 114A00009288



COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT:		PROPERTIES		
	(Name	of Resulting Florida Limit	ed Company)	
The enclosed Articles Business Entity" in	les of Conversion, Artic to a "Florida Limited L	cles of Organization, and iability Company" in a	nd fees are submitted to concordance with s. 605.104	onvert an "Other 45, F.S.
Please return all co	rrespondence concernin	g this matter to:		
BRENDAN	(Contact Person)			
	(Contact Person)			
BUTHTRE	E PROPERTIES	.		
	(Firm/Company)			
2651 Hof				
2631 HO	(Address)			
	(11001005)			
SARASOT	A,FL 3423	<u> </u>		
	(City, State and Zip Code)			
brendan	malker 61@g	mailicem		
E-mail Address: (to	be used for future annual re	port notifications)		
For further information	tion concerning this ma	tter, please call:		
Brendan 1	Walker	_at (941) 3	30 7580	
(Name of Con		(Area Code) (Day	ytime Telephone Number)	
Enclosed is a check	for the following amou	int:		
☐ \$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	201
STREET ADDRES	.22	MAILING A	ADDRESS,	74. J
Registration Section		Registration	= : :	JUN 13
Division of Corpora		Division of (23 5
Clifton Building		P. O. Box 63		i ri chi
2661 Executive Cer	nter Circle	Tallahassee,		
Tallahassee, FL 32	301	,		oggi 🖛

Tallahassee, FL 32301

44.7

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

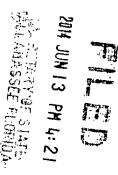
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
GUNTREE PROPERTIES, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 06 0 2014. (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



Signed this 21 day of may	20 <u>14</u>
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	Title: 05/21/14
Signature of Authorized Representative:	
Printed Name: PRESIDENT	Title: 05(2) 14
Signature(s) on behalf of Other Business Entity:	
Signature:	
Printed Name: BRENDAN WALKER	Title: PRESIDENT
Trined Name. Dreitpan	Title. Titlestpeet
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signatura	
Signature:Printed Name:	Title:
Frinted Name.	_ ride.
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
TATEL 11 C	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an Inc	
11 Directors of Officers have not been selected, an inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

Page 2 of 2



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLE L. Nomen				
ARTICLE I - Name: The name of the Limited Liability Company is:				
	•			
Cumtree Properti	اسار کھے۔	<u>-C</u>	<u> </u>	
(Must end witt the words. Entitled Elabilit	y Company,	Libroi, Of DEC.)	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal off	ice of the Limi	ted Liability Co	ompany is:
Principal Office Address:	<u>Mailing</u>	Address:		
2651 HOPE ST	15 P	ARADISE F	242 0	
SARASOTA, FL 34231	# 7	ARADISE F 247 ASOTA, FL		
	SAR	ASOTA, FL	34239	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.). The name and the Florida street address of the re	red Agent. Y	ou must designate a		
10 mm - 4 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m	V			
Brendan Wal	Ker			
2651 Hope S				
Florida street address (P.O.	Box NO	acceptable)		
Sarasota	FL	34231 Zip		
City		Zip		
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regional.	this certifi ty. I furthe erformanc	cate, I hereby a er agree to com e of my duties, a	ccept the appoi ply with the pro and I am famili	ntment as visions of al ar with and
MAN		•	4	20
Registered Agent's Signa	ature (REC	QUIRED)		2014 JUN 13
(CONTINU	ÆD)		ରେ : ୧୯ : (୯) : (୯) :	1
Page 1 of	2			PM 4:2

Company:	•	
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	Brendan Halker	
MGR	2651 Hope St	
KIOL	Sarasola, FL 3423	<u> </u>
_		····
MbR	christy Halker	<u> </u>
	2651 Hope St Savasole, FL 342	21
	Savasor IPC 341	-21
		<u></u>
in effective date is listed, the date must	e date of filing: be specific and cannot be more than	(OPTIONAL) n five business days p
TICLE V: Effective date, if other than the an effective date is listed, the date must be r 90 days after the date of filing.)	e date of filing: be specific and cannot be more than	(OPTIONAL) n five business days p
(Use attachment if necessary) TICLE V: Effective date, if other than the an effective date is listed, the date must be 190 days after the date of filing.) TICLE VI: Other provisions, if any.	e date of filing: be specific and cannot be more than	(OPTIONAL) n five business days p
TICLE V: Effective date, if other than the an effective date is listed, the date must be r 90 days after the date of filing.)	e date of filing: be specific and cannot be more than	(OPTIONAL) n five business days p
TICLE V: Effective date, if other than the an effective date is listed, the date must r 90 days after the date of filing.) TICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	be specific and cannot be more than	n five business days p
FICLE V: Effective date, if other than the an effective date is listed, the date must be r 90 days after the date of filing.) FICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member	be specific and cannot be more than	five business days p
FICLE V: Effective date, if other than the an effective date is listed, the date must be r 90 days after the date of filing.) FICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (1))	r or an authorized representative of (b), Florida Statutes, the execution of	a five business days p
FICLE V: Effective date, if other than the an effective date is listed, the date must be r 90 days after the date of filing.) FICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0203 (1 constitutes an affirmation under the penal I am aware that any false information sulters.)	r or an authorized representative of alties of perjury that the facts stated he bmitted in a document to the Departm	a five business days p
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Filing Fees: \$125.00 Filing Fee for Articles of of Registered Agent	ror an authorized representative of (b), Florida Statutes, the execution of alties of perjury that the facts stated he bmitted in a document to the Department of the facts of perjury that the facts stated here. NALKER oed or printed name of signee	a member. of this document erein are true. tent of State.
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The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-