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SECKE TARY OF STATE STATE ON OF CORPORATIONS

DEC 16 2014
J. HARRIS

14295 S. Tamiami Trail North Port, FL 34287 www.wkevinrussell.com



Phone: 941-429-1871 Fax: 941-429-8961 Kevin@wkevinrussell.com

December 9, 2014

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

#### To Whom It May Concern:

Enclosed, please find the following to convert a Four Oaks Properties, LLC, a California limited liability company to Leggio Properties, LLC, a Florida limited liability company:

- Certified copy of State of California Certificate of Conversion
- Florida Division of Corporations Cover Letter
- Articles of Conversion for "Other Business Entity" into a Florida limited liability company
- Articles of Organization for Leggio Properties, LLC
- Check #6625 in the amount of \$150.00 for filing fees

Please feel free to contact our office if any additional information is required. Thank you for your assistance with this matter.

Very truly yours,

W. KEVIN RUSSELL, P.A.

Melissa S. Danie

Paralegal

/msd Enclosures

#### **COVER LETTER**

Division of C	orporations				
SURIFCT. LEGGI	O PROPERTIES, LI	LC			
SODSECT.		of Resulting Florid	1 Limite	ed Company)	
				nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.	
Please return all corre	espondence concernin	g this matter to:			
W. KEVIN RUSSE	LL				
	(Contact Person)		_		
W. KEVIN RUSSE	LL, P.A.				
	(Firm/Company)		-		
14295 S TAMIAMI	TRAIL				
	(Address)		-		
NORTH PORT, FL	34287				
(0	City, State and Zip Code)		-		
KEVIN@WKEVINF	RUSSELL.COM				
E-mail Address: (to b	e used for future annual re	port notifications)	-		
For further information	on concerning this ma	tter, please call:			
W. KEVIN RUSSEI	LL	_at (941	ر429 ر	-1871	
(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)	
Enclosed is a check for	or 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 and Certified Cop		S185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS	S:	MAIL.	ING A	ADDRESS:	
			stration Section		
Division of Corporations Div			sion of Corporations		
Clifton Building		P. O. B		····	
2661 Executive Cente	er Circle	Tallaha	issee, I	FL 32314	

Tallahassee, FL 32301

TO: Registration Section

#### **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.

	(Enter Name of Other Business Entity)
2. The "Other Business Ent	ity" is a LIMITED LIABILITY COMPANY
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or in	ncorporated under the laws of CALIFORNIA
on 6/25/1997	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formati	on or incorporation)
3. The name of the Florida	Limited Liability Company as set forth in the attached Articles of Organization:
LEGGIO PROPERTIES,	LLC
(Ent	er Name of Florida Limited Liability Company)
4. If not effective on the dat	te of filing, enter the effective date:
(The effective date:  1) can date this document is filed	not be prior to date of receipt or filed date nor more than 90 days after the by the Florida Department of State; <u>AND</u> 2) must be the same as the effective Articles of Organization, if an effective date is listed therein.)

Page 1 of 2

Signed this day of DECEMBER	20 <u>14</u>						
Signature of Authorized Representative of Limited Liability Company:							
Signature of Authorized Representative: Air	Title: power MEMBER						
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]							
Signature: Printed Name: FRANK LEGGIO, TRUSTEE	ma khadea						
Printed Name: FRANK LEGGIO, TRUSTEE	Title: MUBIL						
Signature: Lie Sessee  Printed Name: JILL LEGGIO	THE MEMBER						
PTINEO Name: JILL LEGGIO	Title: MEMBER						
Signature:	The state of the s						
Printed Name:	Title:						
Signature:							
Printed Name:	Title:						
Signature:							
Signature:Printed Name:	Title:						
Signature:							
Printed Name:	Title:						
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.							
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.							
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.							
<u> </u>							
All others: Signature of an authorized person.							
Fees:							
Articles of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$125.00						

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\$30.00 (Optional) \$5.00 (Optional)

Certified Copy: Certificate of Status:

#### ARTICLES OF ORGANIZATION OF LEGGIO PROPERTIES, LLC, A LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles of Organization hereby certifies that:

#### ARTICLE I - Name:

The name of the limited liability company (hereinafter referred to as the "Company") is "LEGGIO PROPERTIES, LLC"

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Company is: 2404 Harbour Dr., Punta Gorda, FL 33983.

#### ARTICLE III - Registered Agent:

The name and the Florida street address of the initial registered agent is: W. KEVIN RUSSELL, ESQ., W. KEVIN RUSSELL, P.A., 14295 S. TAMIAMI TRAIL, NORTH PORT, FL 34287

#### ARTICLE IV - Management and Members:

The Company shall be managed by the Members.

The Members of the Company shall be:

Frank Leggio Family Trust dated April 27, 2001 2404 Harbour Dr. Punta Gorda, FL 33983

> Jill Leggio 2404 Harbour Dr. Punta Gorda, FL 33983

#### ARTICLE V - Limitation on Agency Authority of Members:

Pursuant to Section 605 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to by my act this 12/3 day of December, 2014.

Frank Leggio, Trustee

Frank Leggio Family Trust dated

April 27, 2001, Member

Jill Leggio, Member

In accordance with Section 605.0203(1)(h), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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## STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT OF LEGGIO PROPERTIES, LLC

I hereby accept the designation as registered agent to accept service of process for the above-stated limited liability company at the place designated in this statement. My street address is 14295 S. Tamiami Trail, North Port, FL 34287. 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 under Chapter 605, Florida Statutes.

W. Kevin Russell, Esq. Registered Agent

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



### State of California **Secretary of State**

CONV-1A

## File# 199717610010

FILED Secretary of State State of California



NOV 2 D 2014

This Space For Filing Use Only

#### Certificate of Conversion

IMPORTANT - Read all instructions before completing this form.

C	onverted Entity Information	**		
1.	Name of Converted Entity			
	Leggio Properties, LLC			
2.	Form of Entity	3. Jurisdiction		
	Limited Liability Company	Florida		
4.	Mailing Address of Chief Executive Office	City	State	Zip Code
	2404 Harbour Dr.	Punta Gorda	FL	33983
5.	Street Address of Chief Executive Office - Do not list a P.O. Box	City	State	Zip Code
	2404 Harbour Dr.	Punta Gorda	FL	33983
6.	Street Address of the California Office, if any - Do not list a P.O. Box	City	State	Zip Code
			CA	
7.	Mailing Address of Agent for Service of Process	City	State	Zip Code
	14295 S. Tamiami Trail	North Port	FL	34287
C	onverting Entity Information		<del></del>	<u>-</u>
8.	Name of Converting Entity			

Four Oaks Properties, LLC

9. Form of Entity

Limited Liability Company

10. Jurisdiction

California

11. CA Secretary of State File Number, if any

199717610010

12. The principal terms of the plan of conversion were approved by a vote of the number of interests or shares of each class that equaled or exceeded the vote required. If a vote was required, the following was required for each class:

The class and number of outstanding interests entitled to vote.

The percentage vote required of each class.

Membership - 100% Membership

100%

Interest

#### Additional Information

Interest

- 13. Additional information set forth on the attached pages, if any, is incorporated herein by this reference and made part of this certificate.
- 14. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge. I declare I am the person who executed this instrument, which execution is my act and deed.

Signature of Authorized Pers

7Signature of Authorized Person

Frank Leggio, Trustee

Type or Print Name and Title of Authorized Person Frank Leggio Family Trust Dated April 27,2001

Marina I Member

Jill Leggio , Member

Type or Print Name and Title of Authorized Person

CONV-1A (REV 05/2014)

APPROVED BY SECRETARY OF STATE