

L15000029635

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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15 FEB 12 PM 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers FEB 18 2015



SIMSES & Associates, P.A.
ATTORNEYS AT LAW

Janine A. Guastamacchia
Direct Dial: (561) 655-4054
janineg@simseslaw.com

February 11, 2015

FEDERAL EXPRESS

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

Re: Articles of Amendment, Conversion and Dissolution Forms

Dear Sir or Madam,

Enclosed are documents for the following entities:

Summit Holdings GP, LLC
Summit Holdings Limited Partnership
117 Glover, LLC
79 Glover, LLC
67-69 Glover, LLC
87 Glover, LLC
109-111 Glover, LLC2 Oakwood LLC

Also enclosed is our firm's check in the amount of \$1,366.25 to cover the fees for all entities.

Do not hesitate to contact me if you have any questions regarding the enclosed.

Sincerely,



Janine A. Guastamacchia
JAG/knk

Enclosures

cc: Mr. and Mrs. James Neff

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Summit Holdings GP, 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:

Janine A. Guastamacchia

(Contact Person)

Simses & Associates, PA

(Firm/Company)

251 Royal Palm Way, Suite 400

(Address)

Palm Beach, FL 33480

(City, State and Zip Code)

Libby@toplineadmin.com

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

For further information concerning this matter, please call:

Janine A. Guastamacchia at (561) 835-1313

(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

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:
Summit Holdings GP, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited liability company.

(Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Connecticut
on September 15, 1998
(date of organization, formation or incorporation) (Enter state, or if a non-U.S. entity, the name of the country)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
Summit Holdings GP, 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 all applicable statutes.

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Signed this 18th day of December 2014.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Carmit P. Neff & James K. Neff
Printed Name: James K. Neff & Carmit P. Neff Title: Managers

Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: James K. Neff
Printed Name: James K. Neff Title: Member

Signature: Carmit P. Neff
Printed Name: Carmit P. Neff Title: Member

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

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.

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)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Summit Holdings GP, 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:

7892 Fisher Island Drive
Fisher Island, FL 33109

Mailing Address:

7892 Fisher Island Drive
Fisher Island, FL 33109

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:

Janine A. Guastamacchia

Name

251 Royal Palm Way, Suite 400

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

Palm Beach

City

FL 33480

Zip

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TALLAHASSEE, FLORIDA

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)

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:

James K. Neff

7892 Fisher Island Drive

Fisher Island, FL 33109

MGR

Carmit P. Neff

7892 Fisher Island Drive

Fisher Island, FL 33109

(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:

James K. Neff and Carmit P. Neff

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.)

James K. Neff & Carmit P. Neff

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)