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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

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15 AUG 28 AM II: 00

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COVER LETTER ;

Division of C				
SUBJECT: TALLAI	DEGA LAND MANAGEM	IENT LLC		
	(Name	of Resulting Florida Limi	ted Company)	_
		_	nd fees are submitted to accordance with s. 605.1	
Please return all corr	espondence concernin	g this matter to:		
GREGORY S. OSWAL	Т			
	(Contact Person)	· · · · · · · · · · · · · · · · · · ·		
GREGORY S. OSWAL	T, CPA			
	(Firm/Company)			
127 HARBOR BLVD S	TE 10A			
	(Address)			
DESTIN, FL 32541				
	City, State and Zip Code)			
GOSWALT@COX.NET	r			
E-mail Address: (to l	be used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
GREG OSWALT		_at (850)654	9054	
(Name of Conta	act Person)	(Area Code) (Da	9054 sytime 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	5
STREET ADDRES	S:	MAILING	ADDRESS:	青五
Registration Section		Registration		28 28
Division of Corporat	ions		Corporations	
Clifton Building 2661 Executive Cent	er Circle	P. O. Box 63 Tallahassee,		Colored and
Tallahassee, FL 323		rananassee,	IL 32314	90 90



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 18, 2015

GREGORY S. OSWALT 127 HARBOR BOULEVARD SUITE 10A DESTIN, FL 32541

SUBJECT: TALLADEGA LAND MANAGEMENT LLC

Ref. Number: W15000055277

We have received your document for TALLADEGA LAND MANAGEMENT LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 315A00017405

15 AUG 28 AH II: 00

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED

15 AUG 28 AM II: 00

SECRETARY OF STATE
FALLAMASS E. FLORIDA

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: TALLADEGA LAND MANAGEMENT LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on 11/22/2000 (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
TALLADEGA LAND MANAGEMENT LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 7/1/2015
(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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Page 1 of 2

5. The plan of conversion has been approved in accordance with all applicable statutes.

Signed this 16th day of JULY	20_15	
Signature of Authorized Representative of Lim	ited Liability Company:	
Signature of Authorized Representative: Printed Name: GREGORY S. OSWALT	Title: CPA	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: Robert P. Tucker D Printed Name: ROBERT P. TUCKER III	Title: MGR	
Signature: Robert P. Jucker		
Printed Name: ROBERT P. TUCKER IV Signature: Robun K. Tucker	Title: MGR	
Printed Name: ROBYN R. TUCKER	Title: MGR	
Signature:Printed Name:	Title:	
Signature:Printed Name:		
-		
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liabili Signature of one General Partner.	corporator must sign. ty Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		55
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	AUG 28 AH

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ICLE	I - N	√ame:
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The name of the Limited Liability Company is:

FILED 15 AUG 28 AM II: 00

TALLADEGA LAND MANAGEMENT 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:Mailing Address:TALLADEGA LAND MANAGEMENT LLCTALLADEGA LAND MANAGEMENT LLC48 SEA WALK CIRCLE48 SEA WALK CIRCLESANTA ROSA BEACH, FL 32459SANTA ROSA BEACH, FL 32459

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:

ROBERT P. TUCKER III	
Nar	ne
48 SEA WALK CIRCLE	
Florida street address (P.	O. Box NOT acceptable)
SANTA ROSA BEACH	FL 32459
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)

Page 1 of 2

A	RT	Ľ	IV.
H	K I	 æ	1 V -

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	DODINIK MUGUED
MGR	ROBYN K. TUCKER
	610 6TH AVE NE
	JACKSONVILLE, AL 36265
MGR	ROBERT P. TUCKER IV
	905 11TH STREET NE
	JACKSONVILLE, AL 36265
MGR	ROBERT P. TUCKER III
MOK	48 SEA WALK CIRCLE
	SANTA ROSA BEACH, FL 32459
(Use attachment if necessary)	
TICLE V: Effective date, if other than the n effective date is listed, the date must 90 days after the date of filing.) If the date inserted in this block does not meet	the applicable statutory filing requirements, this date will not be listed as
ricle V: Effective date, if other than the n effective date is listed, the date must 90 days after the date of filing.) If the date inserted in this block does not meet ment's effective date on the Department of State's	be specific and cannot be more than five business days put the applicable statutory filing requirements, this date will not be listed as
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ricle V: Effective date, if other than the n effective date is listed, the date must 90 days after the date of filing.) If the date inserted in this block does not meet the nent's effective date on the Department of State's CICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member This document is executed in accordance.	the applicable statutory filing requirements, this date will not be listed as 's records.

ROBERT P. TUCKER III

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)

Page 2 of 2