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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
1015-910390
W15-16780 (Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SEP -4 2015 N. CAUSSEAUX

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Unique Horizons 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:
Appka FL 32703 (City, State and Zip Code) Lnique horizons Quahoo, Comember E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call: 10 10 10 10 10 10 10 1
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & Status \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certified Copy \$\$185.00 Filing Fees & Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 21, 2015

KATHY JOHNS UNIQUE HORIZONS 3435 OCOEE APOPKA ROAD APOPKA, FL 32703

SUBJECT: UNIQUE HORIZONS LLC

Ref. Number: W15000026880

We have received your document for UNIQUE HORIZONS LLC and your check(s) totaling \$185.00. However, the document has not been filed and is being retained in this office for the following:

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 e-mail me using the reference number listed in this letter when the 2015 annual report has been filed.

If you are unable to fax, you may email me at nanette.causseaux@dos.myflorida.com.

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.

Nanette Causseaux Regulatory Specialist II Supervisor

Letter Number: 015A00007708

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.

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 Support of 12-101/6 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Florida on 01 30 30 12 (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: Unique Horizon LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 03 30 15 . (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.

Page 1 of 2

FILED

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SECULLATIVES SEE PLORIDA

Signed this <u>Alo</u> day of March	20_15		
Signature of Authorized Representative of Limit			
Signature of Authorized Representative: Printed Name: United Name: Valley O	hit falleys Title: ED		
Signature(s) on behalf of Other Business Entity:			
Signature: Printed Name: Christyan Valle o	Titlé: Aresident		
Signature: Printed Name: KATH JOHNS	Title: OFFICER		
Signature:Printed Name:			
Signature: Printed Name:	Title:		
Signature:Printed Name:			
Signature:Printed Name:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C		2 / 1	
If Directors or Officers have not been selected, an Inc	corporator must sign.	試照の	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	SEP -L	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	74-	*
All others: Signature of an authorized person.			,
Fees:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

· · ARTICLE I - Name:

The name of the Limited Liability Company is:

Unique Horizons 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: 3435 OCDEE Apopkard 3435 OCDEE Apopkard Apopka, FL 32703 Apopka, FL 32703 32703
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: Name 3435 OOFE Apopka Rol Florida street address (P.O. Box NOT acceptable)
Apopka FL 33703 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..

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

Christian 3435 Ox Apopkan 3435 Oc Apopkan	n Valle DEE AR TOWNS DEE AGO DEE AGO	D DPKa RO DPKa Rd 103	(
Apopka Apopka Apopka	Johns DEE AGO JOHNS DEE AGO JEL 33	boka Ko oza Rd 703	,
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