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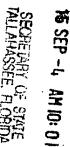
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone	#)			
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates	of Status			
Special Instructions to Filing Officer:				

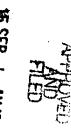
Office Use Only



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COVER LETTER

Division of Corporations				
SUBJECT: FL IMMO, L	L C			
(Name of Result	ing 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 m	atter to:			
Roger Eiers (Contact Person)				
(Firm/Company)				
2370 NE Fark St.				
Jensen Beach, FL :	34957			
(City, State and Zip Code)				
Roger@elers.com E-mail Address: (to be used for future annual report noti	fications)			
For further information concerning this matter, ple	•			
Janet Lagerstrom at G	Area Code) (Daytime Telephone Number)			
Enclosed is a check for the following amount:				
/\	80.00 Filing Fees ertified Copy Certified Copy, and Certificate of Status			
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314			

Tallahassee, FL 32301

APPHUVEL

Articles of Conversion For "Other Business Entity" Into

NO SEP -4 AM 10: 01 SECRETARY OF STATE

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> 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: FL IMMO INC P/4-21169.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation (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 March 07, 2014. (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:
(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.) 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.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

1. 2 		APPHOVEL -		
Signed this 24th day of August	20 5.	FILED		
Signature of Authorized Representative of Limit	ed Liability Company:	16 SEP -4 AM 10: 01		
Signature of Authorized Representative: Printed Name: Roger Elers	Title: Member	SECRETARY OF STATE TALLAHASSEE FLORIDA		
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]				
Signature: Printed Name: Eters	Title: <u>Presiden</u> +			
Signature: Printed Name:	Title:			
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: 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:
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
(Musicina with the words Elimited Diability Company, E.D.C., of EDC.)
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
2370 NE Park St. Jensen Beach, FL 34957 Jensen Beach, FL 34957
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:
Roper Fiers
Koger Eiers Name
2370 NE Park St.
Florida street address (P.O. Box NOT acceptable)
· , · · · · · · · · · · · · · · · · · ·
Jensen Beach FL 34957
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment 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 1005, F.S. Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-		机的			
The name and address of each person	authorized to manage and contro	ol the Limited Liability			
Company:	_	18 SEP -4 AM 10: 01			
		MA SEL -4 MAINSOF			
<u>Title:</u>	Name and Address:	PRODUCTION OF STATE			
"AMBR" = Authorized Member		SECRETARY OF STATE TALLAHASSEE, FLOSIDA			
"MGR" = Manager	~ _ _ '	INCLASSINGUES. PECHNIJA			
MGR	Roger Elers				
	2370 NE Park	Sti			
	Jensen Beach	, FL 34957			
1100	^:				
MGR	Coral Fiers				
	2370 NE Park	54:			
	Jensen Beach.	FL 34957			
	33.30.				
(Use attachment if necessary)					
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must he		(OPTIONAL)			
to or 90 days after the date of filing.)	e specific and cannot be more	man nve business days prio.			
Note: If the date inserted in this block does not meet the	e applicable statutory filing requirement	nts, this date will not be listed as the			
document's effective date on the Department of State's	records.	•			
ARTICLE VI: Other provisions, if any.					
<u>REQUIRED</u> SIGNATURE:)			
	or an authorized representative				
	cordance with section 605.0203 (1) (b),				
	ation submitted in a document to the De as provided for in s.817.155, F.S.	partment of State			
	-				
Koge	er Elers				
¶√p	ed 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