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(Rec	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	<u>.</u>
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

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FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 23, 2015

EVENLYN R. GONZALEZ ACCOUNTING CENTER FOR SMALL BUSINESS LLC 5701 DOGWOOD DR ORLANDO, FL 32807

SUBJECT: VIPHOMES OF ORLANDOLLS VIP HOMES OLLANDO, LLC

Ref. Number: W15000070285

We have received your document for VIP HOMES OF ORLANDO LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by an authorized person.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6052.

Tyrone Scott Regulatory Specialist II

Letter Number: 815A00022456

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www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations	ı
SUBJECT: VIP HOMES ORLANDO, LLC	
(Nam	e of Resulting Florida Limited Company)
	icles of Organization, and fees are submitted to convert an "Other Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerni	ing this matter to:
EVELYN R. GONZALEZ EA	
(Contact Person)	······································
ACCOUNTING CENTER FOR SMALL BUSIN	IESS LLC
(Firm/Company)	
5701 DOGWOOD DR	
(Address)	
ORLANDO FL 32807	
(City, State and Zip Code))
JULIANA@JULIANAOSORIO.COM	
E-mail Address: (to be used for future annual	report notifications)
For further information concerning this m	natter, please call:
EVELYN R GONZALEZ	at ()
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
□ \$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	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

INHS11 (06/15)

Tallahassee, FL 32301

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.

MARTHA J OSORIC	D, P.A. — O DUD Articles of Conversion is:
(Enter Name of Other Bo	
2. The "Other Business Entity" is aCORPOR.	ATION
	Example: corporation, limited partnership, ship, common law or business trust, etc.)
First organized, formed or incorporated under the la	ws of
on 10/10/2007	(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 Compa	any as set forth in the attached Articles of Organization:
VIP HOMES ORLANDO, LLC	
(Enter Name of Florida Limited I	Liability Company)
date this document is filed by the Florida Depart date listed in the attached Articles of Organization	receipt or filed date nor more than 90 days after the ment of State; AND 2) must be the same as the effective on, if an effective date is listed therein.) icable statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been approved in acco	ordance with all applicable statutes.

Page 1 of 2

Signed this 9 day of OCTOBER	20_15
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Printed Name: MARTHA JULIANA OSORIO SERRAND	Title: PRESIDENT
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	
Printed Name: PARPIA JULIANA ODORIO	Title: PEDIDENT
Signature:Printed Name:	rp.1.
Printed Name:	_ 1 tile:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	_ Title:
ICPI: dd- Compandian	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Corporation.	Officer
If Directors or Officers have not been selected, an Inc	
if Directors of Officers have not occit scienced, all file	corporator must sign.
If Florida General Partnership or Limited Liabili	v Partnershin:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:
Signatures of ALL General Partners.	
•	
All others:	
Signature of an authorized person.	
_	
Fees:	
Aminlan of Communication	\$35.00
Articles of Conversion:	\$25.00 \$135.00
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Ontional)
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
CELITICATE OF STATUS.	φυ,συ (Ορασιαι)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	VIP HOMES ORLA	
(Mu	st end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Ad		
The mailing addres	ss and street address of the	principal office of the Limited Liability Company
Principal Office A	ddress:	Mailing Address:
		1510C CALIDERDA DUN
15126 GAULBERRY	RUN	15126 GAUBERRY RUN
ARTICLE III - R The Limited Liability Countries entity with an	FL 34787-8708260 egistered Agent, Register	winter Garden FL 34787-8708260 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - R The Limited Liability Countries entity with an	egistered Agent, Register ompany cannot serve as its own Reactive Florida registration.)	winter Garden FL 34787-8708260 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
ARTICLE III - R The Limited Liability Countries entity with an	egistered Agent, Register ompany cannot serve as its own Reactive Florida registration.) Florida street address of th	winter Garden FL 34787-8708260 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
ARTICLE III - R (The Limited Liability Countries entity with an	egistered Agent, Register ompany cannot serve as its own Reactive Florida registration.) Florida street address of th MARTHA JULIANA Na	winter Garden FL 34787-8708260 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another re registered agent are: OSORIO SERRANO
WINTER GARDEN I ARTICLE III - R The Limited Liability Cousiness entity with an	egistered Agent, Register company cannot serve as its own Re active Florida registration.) Florida street address of th MARTHA JULIANA Na	winter Garden FL 34787-8708260 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: OSORIO SERRANO me
WINTER GARDEN I ARTICLE III - R The Limited Liability Cousiness entity with an	egistered Agent, Register company cannot serve as its own Re active Florida registration.) Florida street address of th MARTHA JULIANA Na	winter Garden FL 34787-8708260 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: OSORIO SERRANO me LBERRY RUN

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	MARTHA JULIANA OSORIO SERRANO
	15126 GAULBERRY RUN
	WINTER GARDEN FL 34787
LE V: Effective date, if other than	the date of filing: (OPTIONAL ust be specific and cannot be more than five business da
ffective date is listed, the date mu days after the date of filing.)	ust be specific and cannot be more than five business da eet the applicable statutory filing requirements, this date will not be list
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LE V: Effective date, if other than ffective date is listed, the date mutidays after the date of filing.) the date inserted in this block does not muti's effective date on the Department of St. LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a menual translation of the degree feet of the date of t	eet the applicable statutory filing requirements, this date will not be lie ate's records. There or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S. TARTHA JULIANA OSORIO SERRANO Typed or printed name of signee Filing Fees es of Organization and Designation of Registered Agen

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