# 15000192382

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)
(Address)  (City/State/Zip/Phone #)
(Address)  (City/State/Zip/Phone #)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
PICK-UP   WAH   MAIL
(Business Entity Name)
•
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1215-24690 Sign & Date
Office Use Only



700270590657

03/17/15--01003--010 \*\*150.00

FILED
2015 NOV 10 PH 5: 27
SECRETARY OF STATE
ALLANDASSEE, FLORID.

K.SALY EXAMINER NOV 17 2015



April 9, 2015

LAWRENCE R. MEYER 5080 ANNUNCIATION CIRCLE #308 AVE MARIA, FL 34142

SUBJECT: MALLVIEW, LLC Ref. Number: W15000024690

We have received your document for MALLVIEW, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

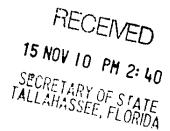
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

www.sunbiz.org

Letter Number: 715A00007080



Karen Saly Regulatory Specialist II Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Ms. Saly,

Thank you for your correspondence and the subsequent phone conversation. I think I have everything in order now.

I am sorry this has taken so long, we only recently moved physically to Florida, making this our official domicile, and shortly afterwards, our two daughters also decided to do the same and so it has been quite a busy time making the transition to the Sunshine State.

Please let me know if there is anything further I need to do.

11/5/2015

Sincerely,

Larry Meyer

LarryMeyerVI@GMail.com

320-248-1911

5080 Annunciation #308 Ave Maria, FL 34142

### **COVER LETTER**

TO:	Registration S Division of C				
SUBJ	ECT: Mallvie	w, LLC			
			of Resulting Florida	Limite	d Company)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corr	respondence concernin	g this matter to:		
Lawr	ence R.Meye	r			
		(Contact Person)			
Mally	view, LLC				
		(Firm/Company)			
5080	Annunciation	Circle #308			
		(Address)			
Ave I	Maria, FL 34	1142			
	(0	City, State and Zip Code)			
Larry	MeyerVI@GN	Mail.com			
E-n	nail Address: (to b	e used for future annual re	port notifications)		
For fu	rther informati	on concerning this ma	tter, please call:		
	ence Meyer	G	_at (320	248-	1911
	(Name of Conta	act Person)	(Area Code)	(Day	time Telephone Number)
Enclo	sed is a check t	for the following amou	int:		
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Copy		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Regist Divisi Clifto 2661	tration Section on of Corporat in Building Executive Cent hassee, FL 323	ions er Circle	Registra Division P. O. Bo	ntion S n of C ox 632	orporations
 INHSI	1 (02/14)		•		

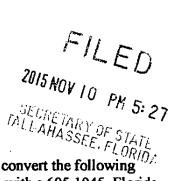
#### **Articles of Conversion**

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:
Mallview, LLC MO700000 3658 (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>foreigh</u> <u>Corporation</u> .  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Minnesoty
on $\frac{4-14-2003}{}$ (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)
(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.

Page 1 of 2

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

Signed this 12 th day of March	2015 F/L  red Liability Company: 2015 NOV 10 P
Signature of Authorized Representative of Limit	ed Liability Company: 20/5 MOV 10
Signature of Authorized Representative: Printed Name: Lawrence R. Meyer	
Signature(s) on behalf of Other Business Entity: [3	See below for required signature(s).
Signature: Lawrence R. Meyer	Til Managing Daylogs
Printed Name: Lawrence R. Meyer	Title: Managing Partner
Signature: Peggy Meyer  Printed Name: Peggy Meyer	Title: Partner
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Clif Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

is:			
ability Company, "L.L.C.," or "LLC.")			
principal office of the Limited Liability Compa	ny is:		
Mailing Address:			
5080 Annunciation Circle #308 Ave Maria, FL 34142			
Ave Maria, FL 34142			
red Office, & Registered Agent's Signature:	-11		
red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:	FILED FILED PH 5: 27		
	bility Company, "L.L.C.," or "LLC.")  principal office of the Limited Liability Compa  Mailing Address:  5080 Annunciation Circle #308		

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Lawrence R. Meyer
	5080 Annunciation Circle # 308
	Ave Maria, FL 34142
AMBR	Peggy A. Meyer
AMDIT	5080 Annunciation Circle # 308
	Ave Maria, FL 34142
	Peggy A. Meyer 5080 Annunciation Circle # 308 Ave Maria, FL 34142
	0 5
	Fig. 7
	n the date of filing: (OPTIONAL)
CLE V: Effective date, if other tha	n the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days p
CLE V: Effective date, if other that effective date is listed, the date is days after the date of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	nust be specific and cannot be more than five business days p
CLE V: Effective date, if other that effective date is listed, the date is days after the date of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a me	mber or an authorized representative of a member.
CLE V: Effective date, if other that effective date is listed, the date is 0 days after the date of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a median accordance with section 605.02	mber or an authorized representative of a member.  03 (1) (b), Florida Statutes, the execution of this document
CLE V: Effective date, if other that effective date is listed, the date is 0 days after the date of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a median accordance with section 605.02 constitutes an affirmation under the	mber or an authorized representative of a member.  03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true.
CLE V: Effective date, if other that effective date is listed, the date is 0 days after the date of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a median accordance with section 605.02 constitutes an affirmation under the	mber or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State
CLE V: Effective date, if other that effective date is listed, the date is listed, the date is days after the date of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a mean accordance with section 605.02 onstitutes an affirmation under the am aware that any false informatic	mber or an authorized representative of a member.  03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.)

Page 2 of 2

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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

**ARTICLE IV-**