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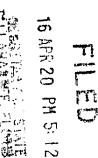
(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

Division of C	orporations		
SUBJECT: GROUP	142 ORLANDO LLC		
Sebelei		of Resulting Florida Limit	ed Company)
			nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:	
RONALD SCHWARTZ			
	(Contact Person)		
GROUP 142 ORLANDO)		
	(Firm/Company)		
POB 536428			
	(Address)		
ORLANDO, FL 32853			
((City, State and Zip Code)		
ron2632@aol.com			
E-mail Address: (to b	e used for future annual re	port notifications)	
For further information	on concerning this ma	tter, please call:	
RONALD SCHWARTZ		_at (407)342.	
(Name of Conta	ct Person)	(Area Code) (Da	ytime Telephone Number)
Enclosed is a check f	or 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
STREET ADDRESS	S:	MAILING.	ADDRESS:
Registration Section		Registration	
Division of Corporati	ons		Corporations
Clifton Building 2661 Executive Center	er Circle	P. O. Box 63 Tallahassee,	
Tallahassee, FL 3230		i alianassee,	11. 32317

TO: Registration Section

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GROUP 142 ORLANDO 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:
RONALD SCHWARTZ
(Contact Person)
GROUP 142 ORLANDO
(Firm/Company)
POB 536428
(Address)
ORLANDO, FL 32853
(City, State and Zip Code)
ron2632@aol.com
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
RONALD SCHWARTZat (407)342.3648
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & Status Status
STREET ADDRESS: Registration Section Division of Corporations Registration Section Division of Corporations Registration Section Division of Corporations
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

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: GROUP 142 ORLANDO, LTD
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED PARTNERSHIP
(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
02/13/1998 (Enter state, or if a non-U.S. entity, the name of the country)
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization GROUP 142 ORLANDO, LLC
(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

Signed this 15TH day of APRIL	20_16
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	Milled
Printed Name: RONLD SCHWARTZ	Title: PRES/OWNER
4	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Printed Name: ROYALVACOWARCY2	T'AL DRES DMA CONSTRUCTION IN
Printed Name: ROMACUS /	Title: PRES, RMA CONSTRUCTION INC
Signature:	
Printed Name:	
Signature:	
Printed Name:	
Signature:	mt.i
Printed Name:	Title:
Signatura	
Signature:Printed Name:	Title:
Timed Name.	Titto.
Signature:	
Printed Name:	Title:
If Florida Corporation:	0.00
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin
Signature of one General Partner.	ty runtifersing.
If Florida Limited Partnership or Limited Liabilit	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compan	y is:
GROUP 142 ORLANDO, 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	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
700 W. FAIRBANKS AVE	POBOX 536428
WINTER PARK, FL 32789	ORLANDO, FL 32853
business entity with an active Florida registration.) The name and the Florida street address of RONALD SCHWARTZ	the registered agent are: Name
700 W. FAIRBANKS AVE	
Florida street address	(P.O. Box <u>NOT</u> acceptable)
WINTER PARK	FL 32789
City	Zip
liability company at the place designat registered agent and agree to act in this co statutes relating to the proper and comp	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lese performance of my duties, and I am familiar with and its registered agent as provided for in Chapter 605, F.S

(CONTINUED)

Page 1 of 2

AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
AMBR	RONALD SCHWARTZ
The state of the s	700 W, FAIRBANKS AVE
	WINTER PARK, FL 32789
·	, and the second
	
•	
EV: Effective date, if other than ective date is listed, the date m	the date of filing: N/A
fective date is listed, the date m days after the date of filing.)	ust be specific and cannot be more than five business dance the applicable statutory filing requirements, this date will not be li
LE V: Effective date, if other than fective date is listed, the date m days after the date of filing.) the date inserted in this block does not me seffective date on the Department of State VI: Other provisions, if any.	ust be specific and cannot be more than five business dancet the applicable statutory filing requirements, this date will not be litate's records.
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The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

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