L/600087833

(Re	equestor's Name)	
(Ac	ddress)	-
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	ısiness Entity Naı	me)
(Do	ocument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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04/23/16--01022--010 **150.00



MAY 2016 S. GILBERT



BANK OF AMERICA CENTER
390 NORTH ORANGE AVENUE
SUITE 1400
ORLANDO, FL 32801
TELEPHONE. 407.839.4200
FAX 407 425.8377
WWW.BROADANDCASSEL COM

HELEN BROCK FORD PARALEGAL DIRECT LINE: 407.481.5222 DIRECT FACSIMILE: 407.425.8377 EMAIL: HFORD@BROADANDCASSEL.COM

 γ_{λ}

April 25, 2016

VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re: Lake Orlando Properties, LLC

Dear Sir/Madam:

Enclosed for filing please find the Articles of Conversion for Lake Orlando Properties, Inc. into Lake Orlando Properties, LLC, together with our firm's check in the amount of \$150.00. Please return a filed copy of the enclosed to the undersigned at your earliest convenience.

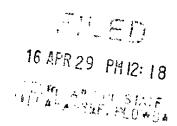
Sincerely,

Helen Brock Ford

Paralegal

/hbf Enclosures

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 A Lake Orlando Properties, Inc.	Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partne general partnership, common law or business trust, et	
First organized, formed or incorporated under the laws of Florida	
November 30, 1992 (Enter state, or if a non-U.S. entil	y, 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:
Lake Orlando Properties, 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	
date this document is filed by the Florida Department of State; <u>AND</u> 2) must be date listed in the attached Articles of Organization, if an effective date is listed <u>Note</u> : If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	therein.)
5. The plan of conversion has been approved in accordance with all applicable state	itea

Page 1 of 2

,	
Signed this 30th day of March	20_16
Signature of Authorized Representative of Lim	ited Liability Company:
	1-2
Signature of Authorized Representative:	
Printed Name: Jolyon E. Cowan	Title: Manager
	Title.
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	
Printed Name: Jolyon E. Cowan	Title: Director
Signature:	
Printed Name:	Title:
Timed Paine.	
Signature:	
Printed Name:	Title
Timed Name.	Title
Signature	
Signature:Printed Name:	Title
i filiteu ivalite.	Title:
Simatura	
Signature:	Tisto
Printed Name:	Title:
C'	
Signature:	77.1
Printed Name:	Title:
ten ti o	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u>	ty Partnership:
Signature of one General Partner.	
<u>lf Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
<u> All others:</u>	
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

•	ny is:	
Lake Orlando Properties, 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 mailing address and street address.	the principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
12 Kent Square, #2	PO Box 470777	
Brookline, MA 02446	Brookline, MA 02447	""
	toyod Office & Pogietoyed Agen	t'a Signatura
ARTICLE III - Registered Agent, Regis (The Limited Limited Limited Company cannot serve as its own business entity with an active Florida registration.)		
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own	Registered Agent. You must designate an ind	lividual or another
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Registered Agent. You must designate an ind	lividual or another
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Oswald & Oswald, P.L.	Registered Agent. You must designate an ind	lividual or another
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Oswald & Oswald, P.L.	Registered Agent. You must designate an ind the registered agent are: Name	lividual or another 16 APR 29 PH
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Oswald & Oswald, P.L. 222 S. Westmonte Drive, S.	Registered Agent. You must designate an ind the registered agent are: Name	lividual or another
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Oswald & Oswald, P.L. 222 S. Westmonte Drive, S.	Registered Agent. You must designate an ind the registered agent are: Name	lividual or another 16 APR 29 PH

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

"AMBR" = Authorized Member "MGR" = Manager	
MGR	Jolyon E. Cowan
	PO Box 470777
	Brookline, MA 02447
(Use attachment if necessary)	
f an effective date is listed, the date must	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
or 90 days after the date of filing.)	the applicable statutory filing requirements, this date will not be listed as the
or 90 days after the date of filing.) ote: If the date inserted in this block does not meet	the applicable statutory filing requirements, this date will not be listed as the
or 90 days after the date of filing.) ote: If the date inserted in this block does not meet becament's effective date on the Department of State	the applicable statutory filing requirements, this date will not be listed as the
or 90 days after the date of filing.) ote: If the date inserted in this block does not meet becament's effective date on the Department of State	the applicable statutory filing requirements, this date will not be listed as the
or 90 days after the date of filing.) ote: If the date inserted in this block does not meet cument's effective date on the Department of State RTICLE VI: Other provisions, if any.	the applicable statutory filing requirements, this date will not be listed as the
or 90 days after the date of filing.) ote: If the date inserted in this block does not meet reument's effective date on the Department of State RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	the applicable statutory filing requirements, this date will not be listed as the s records.
ror 90 days after the date of filing.) ote: If the date inserted in this block does not meet cument's effective date on the Department of State RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member This document is executed in a I am aware that any false inform	the applicable statutory filing requirements, this date will not be listed as the
ror 90 days after the date of filing.) te: If the date inserted in this block does not meet cument's effective date on the Department of State RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of a mem	the applicable statutory filing requirements, this date will not be listed as the s records. For an authorized representative of a member. ecordance with section 605.0203 (1) (b), Florida Statutes. nation submitted in a document to the Department of State vas provided for in s.817.155, F.S.
ror 90 days after the date of filing.) te: If the date inserted in this block does not meet cument's effective date on the Department of State RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of a mem	the applicable statutory filing requirements, this date will not be listed as the s records. Fror an authorized representative of a member. ecordance with section 605.0203 (1) (b), Florida Statutes. nation submitted in a document to the Department of State

Page 2 of 2

\$ 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

Company: