116000136472

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	·····
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Ćertificates	s of Status
Special Instructions to	Filing Officer:	
		!

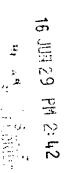
Office Use Only



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06/29/16--01018--011 **150.00

EFFECTIVE DATE



JUL 2017 S. GILBERT



3940 NW 16th Boulevard, Bldg. B Gainesville, Florida 32605

P.O. Box 357399 Gainesville, Florida 32635

T: 352.376.8201 F: 352.376.7996 www.salterlaw.net

STAR M. SANSONE LL.M in Taxation stars@salterlaw.net

June 28, 2016

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Articles of Conversion and Articles of Organization for Summer Place Apartments, LLC

Dear Sir or Madam:

Enclosed please find the Articles of Conversion and Articles of Organization for Summer Place Apartments, LLC, along with our firm check in the amount of \$150.00 for the filing fees. Once filed, please forward the documents to our office.

Sincerely

Star M. Sansone

SMS:mh

cc: Dennis O'Neil



COVER LETTER

TO: Registration Division o	on Section f Corporations				
SUBJECT: Sumn	ner Place Apartments, LLC			•	
		of Resulting Florida	Limite	ed Company)	
				nd fees are submitted to convert a ccordance with s. 605.1045, F.S.	
Please return all c	orrespondence concernin	g this matter to:			
John C. Bovay					
	(Contact Person)				
Salter Feiber, P.A.					
	(Firm/Company)				
3940 N.W. 16th Blvd	l., Bldg. B				
	(Address)				
Gainesville, FL 3260	5				
· · · · · · · · · · · · · · · · · · ·	(City, State and Zip Code)				
kdudley@gremco.co	m				
E-mail Address: (to be used for future annual re	port notifications)			
For further inform	nation concerning this ma	tter, please call:			
John C. Bovay		_at (352	376-8	8201	
(Name of C	ontact Person)	(Area Code)	(Day	ytime Telephone Number)	
Enclosed is a chec	ck for the following amou	ınt:			
\$150.00 Filing Fe (\$25 for Conversion & \$125 for Articles of Organization)	es \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDR	ESS:	MAILI	NG A	ADDRESS:	
Registration Secti		Registra	ition !	Section	
Division of Corpo	orations			Corporations	
Clifton Building	antar Cirola	P. O. Be		27 FL 32314	

INHS11 (06/15)

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

15 MM 29 PM 2:42

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 Er Summer Place Apartments Limited	ntity" immediately prior to the filing of the Articles of Conversion is:
	ame of Other Business Entity)
2. The "Other Business Entity" is a $\frac{\text{Lin}}{\text{Expression}}$	mited Partnership
(En	ter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated	under the laws of Florida
12/31/1992	(Enter state, or if a non-U.S. entity, the name of the country)
on(date of organization, formation or incorpo	pration)
3. The name of the Florida Limited Lia	ability Company as set forth in the attached Articles of Organization:
Summer Place Apartments, LLC	
(Enter Name of F	lorida Limited Liability Company)
4. If not effective on the date of filing,	enter the effective date:
(The effective date: 1) cannot be pridate this document is filed by the Flo	or to date of receipt or filed date nor more than 90 days after the rida Department of State; <u>AND</u> 2) must be the same as the effective Organization, if an effective date is listed therein.)
	t meet the applicable statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been appr	proved in accordance with all applicable statutes

Page 1 of 2

Signed this 28 day of Jule	20_16
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: Printed Name: Cheryl Cooke, President of GREMCO, Inc.	el A Civil
Signature(s) on behalf of Other Business Entity: Signature:	See below for required signature(s)]
Printed Name: Cheryl Cooke, President of GREMCO, Inc.	Title: General Partner
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title
Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, 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: 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	s :	
Summer Place Apartments, LLC		
(Must end with the words "Limited Liah	oility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
4117 S.W. 20th Avenue	P.O. Box 358778	
Gainesville, FL 32607	Gainesville, FL 32635-8778	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	istered Agent. You must designate an inc	
The name and the Florida street address of the	registered agent are.	
Karla Dudley		
Nan	ne	JUH 29
4117 S.W. 20th Avenue		29
Florida street address (P.	O. Box NOT acceptable)	P T
Gainesville	FL 32607	PN 2: 43
City	Zip	₹ % &

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..

egistered Agent's Signature (REQUIREL

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Gainesville Real Estate Management Co., Inc.	
	4127 NW 27th Lane, Suite C	
	Gainesville, FL 32606	
AMBR	Dennis R. O'Neil	
	4127 NW 27th Lane, Suite C	
	Gainesville, FL 32606	
(Use attachment if necessary)		
FICLE V: Effective date, if other than t	the date of filing: 06/30/2016 (OPTIONAL)	
	st be specific and cannot be more than five business days p	
r 90 days after the date of filing.)		
	et the applicable statutory filing requirements, this date will not be listed a	
ment's effective date on the Department of Stat	te's records.	
TICLE VI: Other provisions, if any.		
TICLE VI: Other provisions, if any.		
TICLE VI: Other provisions, if any.		
TICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:	A Cirke	

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

'ARTICLE IV-

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Cheryl Cooke, President of GREMCO, INC., AMBR

Typed or printed name of signce

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