L1600012823

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

Office Use Only

W16-28913



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16 JUL 11 AH 8: 03

COVER LETTER

Division of C	orporations		
SUBJECT: Fleet Fina	ncial Center, LLC		
SUBJECT.	(Name	of Resulting Florida Limite	d Company)
	· · · · · · · · · · · · · · · · · · ·	•	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:	
Kimberly Towers			
	(Contact Person)		
Fleet Financial Center, L	LC		
	(Firm/Company)		
754 Fleet Financial Cour	t, #300		
	(Address)		
Longwood, FL 32750			
((City, State and Zip Code)		
kim@fleetfinancial.net			
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
Kimberly Towers		_at $(\frac{407}{(4-3)})^{\frac{834-3}{2}}$	3400
(Name of Conta	ct Person)	(Area Code) (Day	time Telephone Number)
Enclosed is a check f	for 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 ADDRES	S:	MAILING A	ADDRESS:
Registration Section		Registration	
Division of Corporat	ions	Division of C	-
Clifton Building		P. O. Box 63	27

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Registration Section

TO:



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2016

KIMBERLY TOWERS 754 FLEET FINANCIAL COURT, #300 LONGWOOD, FL 32750

SUBJECT: FLEET FINANCIAL CENTER, LLC

Ref. Number: W16000028913

We have received your document for FLEET FINANCIAL CENTER, LLC and your check(s) totaling \$155.00. 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.

Please return the corrected original and one copy of 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.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 116A00008096

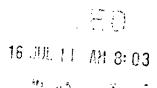
Articles of Conversion

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.

Fleet Financial Center, Inc.	nmediately prior to the filing of the Articles of Conversion is:
(Enter Name of C	Other Business Entity)
2. The "Other Business Entity" is a Corporation	1 ,
(Enter entity	type. Example: corporation, limited partnership, partnership, common law or business trust, etc.)
First organized, formed or incorporated under	the laws of Florida
on April 08, 1994 (date of organization, formation or incorporation)	(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:
Fleet Financial Center, LLC	
(Enter Name of Florida Li	mited Liability Company)
4. If not effective on the date of filing, enter the	he effective date:
date this document is filed by the Florida Dedate listed in the attached Articles of Organ	ate of receipt or filed date nor more than 90 days after the epartment of State; <u>AND</u> 2) must be the same as the effective nization, if an effective date is listed therein.) he applicable statutory filing requirements, this date will not be listed as the records.
5. The plan of conversion has been approved in	n accordance with all applicable statutes.

Page 1 of 2

Signed this 07th	day of April	20_16
Signature of Autho	rized Representative of Limi	ted Liability Company:
	zed Representative:	
		See below for required signature(s)
Signature:	The wer	
Printed Name:	ntourly Towers	_ Title: <u> </u>
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Printed Name:		Title:
Signature: Printed Name:		Title:
If Florida Corporati	ion: in, Vice Chairman, Director, or	Officer.
	rs have not been selected, an In	
If Florida Conoral D	Partnership or Limited Liabili	ty Dartnarchin
Signature of one Gen		ty 1 ar ther suip.
teru mida I imikad D	bautuauahin au Timitad Tiabili	to I imited Deutsenship.
Signatures of ALL G	<mark>Partnership or Limited Liabili</mark> Jeneral Partners.	ty Limited Partnership:
All others:		
Signature of an autho	rized person.	
Fees:		
Articles of C	conversion:	\$25.00
	rida Articles of Organization:	\$125.00
Certified Cop Certificate of		\$30.00 (Optional) \$5.00 (Optional)
Confined Of	· uuius.	Ψ2.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLÈ I - Name:

The name of the Lin	mited Liability Company is:		
Fleet Financial Center,	LLC st end with the words "Limited Liabil	ity Comnany, "L.L.C.," or "LLC.")	
(******		., company, 2.2.2., or 2.2.2.	
ARTICLE II - Add		· · · · · · · · · · · · · · · · · · ·	
The mailing address	s and street address of the pr	rincipal office of the Limited I	Liability Company is:
Principal Office A	ddress:	Mailing Address:	
754 Fleet Financial Cou	urt, #300	754 Fleet Financial Court, #300	
Longwood, FL 32750		Longwood, FL 32750	
(The Limited Liability Co- business entity with an ac		d Office, & Registered Agent tered Agent. You must designate an indiregistered agent are:	
	Michael Towers		g samen gy samen
	Name	e	A 8: 03
	754 Fleet Financial Court, #300		6. G. G.
	Florida street address (P.O	. Box NOT acceptable)	製作 も
i	Longwood,	FL 32750	
	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Michael Towers
	754 Fleet Financial Court, #300
	Longwood, FL 32750
MGR	Kimberly Towers
WION	754 Fleet Financial Court, #300
	Longwood, FL 32750
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
FICLE V: Effective date, if other than t	the date of filing: (OPTIONAL)
FICLE V: Effective date, if other than to an effective date is listed, the date mus r 90 days after the date of filing.)	st be specific and cannot be more than five business days et the applicable statutory filing requirements, this date will not be listed
FICLE V: Effective date, if other than to an effective date is listed, the date must r 90 days after the date of filing.) If the date inserted in this block does not meet	st be specific and cannot be more than five business days et the applicable statutory filing requirements, this date will not be listed
FICLE V: Effective date, if other than the effective date is listed, the date must r 90 days after the date of filing.) If the date inserted in this block does not meet ment's effective date on the Department of States.	st be specific and cannot be more than five business days et the applicable statutory filing requirements, this date will not be listed
FICLE V: Effective date, if other than the effective date is listed, the date must r 90 days after the date of filing.) If the date inserted in this block does not meet ment's effective date on the Department of States.	et the applicable statutory filing requirements, this date will not be listed te's records.
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FICLE V: Effective date, if other than the effective date is listed, the date must represent the date of filing.) If the date inserted in this block does not meet ment's effective date on the Department of State FICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of the content of the conte	et the applicable statutory filing requirements, this date will not be listed te's records. ber or an authorized representative of a member.
ricle V: Effective date, if other than the effective date is listed, the date must reflective date is listed, the date must reflective date of filing.) If the date inserted in this block does not meet ment's effective date on the Department of State FICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of the date of the provisions of the pro	et the applicable statutory filing requirements, this date will not be listed te's records.
ricle V: Effective date, if other than the effective date is listed, the date must represent the date of filing.) If the date inserted in this block does not meet ment's effective date on the Department of State TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of the degree felor constitutes a third degree felor.	et the applicable statutory filing requirements, this date will not be listed te's records. ber or an authorized representative of a member. a accordance with section 605.0203 (1) (b), Florida Statutes. bermation submitted in a document to the Department of State
TICLE V: Effective date, if other than the effective date is listed, the date must represent the date of filing.) If the date inserted in this block does not meet ment's effective date on the Department of State TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membrane that any false information constitutes a third degree felor. Kimberly Towers	et the applicable statutory filing requirements, this date will not be listed te's records. ber or an authorized representative of a member. a accordance with section 605.0203 (1) (b), Florida Statutes. bermation submitted in a document to the Department of State

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

ARTICLE IV-

Page 2 of 2

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)