L/6000 30329

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

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Salter Feiber

2040 NIIVA (| D. | | | D. | |

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 Beval Apartment, LLC

Dear Sir or Madam:

Enclosed please find the Articles of Conversion and Articles of Organization for Beval Apartment, 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 of C			
SUBJECT: Beval A	partment, LLC		
		of Resulting Florida Lim	nited Company)
			and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
John C. Bovay			
	(Contact Person)		
Salter Feiber, P.A.			
 	(Firm/Company)		
3940 N.W. 16th Blvd., 1	Bldg. B		
	(Address)		
Gainesville, FL 32605	,		
(City, State and Zip Code)		
kdudley@gremco.com			
E-mail Address: (to l	se used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
John C. Bovay		at (352)37	6-8201
(Name of Cont	act Person)	(Area Code) (I	6-8201 Daytime Telephone Number)
Enclosed is a check	for the following amou		
\$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	S = \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions ter Circle	Registratio Division of P. O. Box (f Corporations

INHS11 (06/15)

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: Beval Apartment Limited — 1930 (1100) (1100)
(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
08/23/1993 (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:
Beval Apartment, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 06/30/2016
(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; <u>AND</u> 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 empressed in accordance with all applicable statutes

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

Signed this 28 day of June	20_16
Signature of Authorized Representative of Limi	ited Liability Company;
Signature of Authorized Representative: Printed Name: Cheryl Cooke, President of GREMCO, Inc.	Title: MGR
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Charles Cooke President of CREMCO Inc.	
Printed Name: Cheryl Cooke, President of GREMCO, Inc.	Title: General Partner
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
· · · · · · · · · · · · · · · · · · ·	
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
Y673 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of one General Fatther.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All othors	
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

Beval Apartment, LLC (Must end with the words "Limited I	Liability Company, "L.L.C.," or "Ll.C.")
(Musicia Will the Words Elithica I	Enabling Company, 15.15.C., or 15.15.
ARTICLE II - Address: The mailing address and street address of the	ne 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
The name and the Florida street address of	ine registered agent are:
Karla Dudley	
	Name
	Jame
4117 S.W. 20th Avenue	Jame (P.O. Box <u>NOT</u> acceptable)
A117 S.W. 20th Avenue Florida street address (Gainesville	(P.O. Box <u>NOT</u> acceptable) FL 32607
4117 S.W. 20th Avenue Florida street address ((P.O. Box <u>NOT</u> acceptable)

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Gainesville Real Estate Management Co., Inc.
More	4127 NW 27th Lane, Suite C
	Gainesville, FL 32606
•	
(Use attachment if necessary)	
	(ODTIONAL)
TICLE V: Effective date, if other than the an effective date is listed, the date must be 90 days after the date of filing.) E: If the date inserted in this block does not meet ament's effective date on the Department of States.	the date of filing: 06/30/2016 . (OPTIONAL) st be specific and cannot be more than five business days pret the applicable statutory filing requirements, this date will not be listed as e's records.
TICLE V: Effective date, if other than the an effective date is listed, the date must or 90 days after the date of filing.) E: If the date inserted in this block does not mee	et be specific and cannot be more than five business days pr et the applicable statutory filing requirements, this date will not be listed as
TICLE V: Effective date, if other than the an effective date is listed, the date must or 90 days after the date of filing.) E: If the date inserted in this block does not meet iment's effective date on the Department of State TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membra This document is executed in I am aware that any false information.	et be specific and cannot be more than five business days proceed the applicable statutory filing requirements, this date will not be listed as se's records. Der or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. rmation submitted in a document to the Department of State
TICLE V: Effective date, if other than the an effective date is listed, the date must or 90 days after the date of filing.) E: If the date inserted in this block does not meet iment's effective date on the Department of State TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membra This document is executed in I am aware that any false information.	et be specific and cannot be more than five business days part the applicable statutory filing requirements, this date will not be listed as se's records. Der or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes.

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

ARTICLE IV-

\$ 30.00 Certified Copy (Optional)

Solve Status (Optional)

Page 2 of 2

Filing Fees \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent