# L16000135123

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Dusiness Enuty Name)	
(Document Number)	—
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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SECRETARY OF STATE OF



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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 30, 2016

TERRY SIDES 9400 HIGHLAND WOODS BLVD. UNIT 5306 BONITA SPRINGS, FL 34135

SUBJECT: FOCUS SOUTH INC. Ref. Number: W16000046185

We have received your document for FOCUS SOUTH INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

ATTACHED ARE THE CORRECT FORMS NEEDED. OR YOU CAN COMPLETE THEM ON THE WEBSITE THEN PRINT & SEND BACK IN. THE WRONG FORMS WERE SENT IN TO CONVERTEROM A CORP. TO LLC.

There is a fee of \$106.25 due.

Please return 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.

TANYA L HENDERSON Regulatory Specialist II

Letter Number: 116A0001379 TALLAHASSEE FLORIDA

#### **COVER LETTER**

Division of Corpo			
SUBJECT:	Focus South (Name of Res	LLC alting Florida Limited	l Company)
			I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all correspon	ndence concerning this	matter to:	
Terry 5	ontact Person)		
Focus Sou	irm/Company)		
9400 Highla	nd Woods Blud (Address)	1, #5306	
Bonita Spri			
E-mail Address: (to be used	MSh, Obm d for future annual report no	otifications)	
For further information co	oncerning this matter, p	lease call:	
Name of Contact Per	at (	239 <u>28</u> (Area Code) (Dayt	ime Telephone Number)
Enclosed is a check for th	e following amount:		
nana a T		180.00 Filing Fees Certified Copy Paid	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:		MAILING A	
Registration Section		Registration S	

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

#### **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 Focus South Inc. P1000082444	of Conv	version	n is:
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a <u>Corporation</u> .			
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)			
First organized, formed or incorporated under the laws of Florido (Enter state, or if a non-U.S. entity, the na	ame of the	countr	_ y)
on 12/11/2009 (date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Article	es of Or	ganiz	ation:
FOCUS SOUTH LLC (Enter Name of Florida Limited Liability Company)			
4. If not effective on the date of filing, enter the effective date: 7/25/16.  (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 9 date this document is filed by the Florida Department of State; AND 2) must be the state 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 we document's effective date on the Department of State's records.	ame as t n.)	the ef	fective
5. The plan of conversion has been approved in accordance with all applicable statutes.	SEC TABLE	<u>5</u>	सक्ट-मुख्य <u>ी</u>
Page 1 of 2	RETAKY OF ST	THE AME	

•			
Signed this 14 day of July	20 <u>16</u> .	,	
Signature of Authorized Representative of Limit	ted Liability Company:		
Signature of Authorized Representative:  Printed Name: Terry 51des	Pitle: Prosident		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]		
Signature: Meaga Sides Printed Name: Meaga Sides			
Printed Name: Mengan Sides	Title: Vice President		
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Signature: Printed Name:			
Signature:Printed Name:	Title:		
Signature: Printed Name:	Title:	•	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Clif Directors 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 Liability Signatures of ALL General Partners.	y Limited Partnership:	16 JUN SEORE	55
All others: Signature of an authorized person.		TANY OF	dientes.
Fees:		FLOW	() () () () () () ()
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	0 0 0 8	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

Focus South LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

**ARTICLE I - Name:** 

**ARTICLE II - Address:** 

**Principal Office Address:** 

The name of the Limited Liability Company is:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's S (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual business entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are:			
Terry Sides Name			
1400 Highland Woods Blud Unit 5306 Florida street address (P.O. Box NOT acceptable)			
Bonita Springs FL 34135 City Zip			
Having been named as registered agent and to accept service of process for the a liability company at the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with statutes relating to the proper and complete performance of my duties, and I am accept the obligations of my position as registered agent as provided for in Ch	e appoint the provi familiar	ment sions with	as of all and
Registered Agent's Signature (REQUIRED)	SECRETAI	15 JUN 14	Contracts Contracts Contracts
(CONTINUED)	NY OF S	AHI	
Page 1 of 2	∰ <u>.</u> i	••	in the second

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Terry Sides 9400/Highland Woods Alad Unit 5306 Bonita Springs, Fl. 34/35
MGR	Meagan Sides 9400 Highland Woods Blud Unit 5306 Bonity Springs, Fl. 34135
(Use attachment if necessary)	
TICLE V: Effective date, if other than the	date of filing: 7/25/2016 OPTIONAL
an effective date is listed, the date must or 90 days after the date of filing.)	be specific and cannot be more than five business day
e: If the date inserted in this block does not meet t ument's effective date on the Department of State's	he applicable statutory filing requirements, this date with not be liss records.
TICLE VI: Other provisions, if any.	
DECLIDED CLON A TUDE	
REQUIRED SIGNATURE:	011
• 1	A. 4/2

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

Filing Fees
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

Page 2 of 2

Terry Sides
Typed or printed name of signee

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.