L160000005466

(Requ	uestor's Name)	
(Addı	ress)	
(Addı	ress)	
(City/	State/Zip/Phone	, #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	

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SEA TELLY OF STATE ALLAHASSEE, FLORIDA

V HERRING NOV - 9 2016

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Francalby Limited, LLC	
(Name of Resulting Florida Limited Company)
	Articles of Organization, and fees are submitted to convert an "Other ted Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence cond	erning this matter to:
Kathy Link	
(Contact Person)	
Ciklin Lubitz & O'Connell	
(Firm/Company)	
515 N. Flagler Drive, 20th Floor	
(Address)	
West Palm Beach, Florida 33401	
(City, State and Zip C	Code)
aciklin@ciklinlubitz.com	
E-mail Address: (to be used for future an	nual report notifications)
For further information concerning the	is matter, please call:
Kathy Link	at ()832-5900
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following	amount:
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

INHS11 (06/15)



November 1, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CIKLIN LUBITZ & O'CONNELL

SUBJECT: FRANCALBY CORP.

REF: W16000073877

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

A Certificate of Conversion cannot be filed electronically. You must submit the certificate of conversion and the articles by mail.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist III FAX Aud. #: H16000268777 Letter Number: 516A00023401

FILED

FRANK ALJAGA 17381 MORRIS BRIDGE ROAD THONOTOSASSA, FLORIDA 33592

2016 NOV -8 PM 3: 42

SEA TAKE OF STATE
TALEAHASSEE, FLORIDA

November 8, 2016

Secretary of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re:

Articles of Dissolution and Articles of Conversion for "Other Business Entity" Florida Limited Liability Company entitled Françalby Limited, LLC

Ladies and Gentlemen:

I am the authorized representative of Aliaga Family Revocable Trust who voluntarily dissolved Francalby Limited, LLC, Document Number L16000152953, which voluntary dissolution was filed with the Secretary of State on October 31, 2016. We hereby release Francalby Limited, LLC and have no intention of reinstating it.

Sincerely,

Aliaga Family Revocable Trus

By:

Frank Alaga, Authorized Representative

FILED

Articles of Conversion

For

"Other Business Entity"

2016 NOV -8 PM 3: 42 Into SEL MARCOT STATE
Florida Limited Liability Company TALLAHASSEE, FLORIDA

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 Busine Francalby Corp. 620371	ss Entity" immediately prior to the filing of the Articles of Conversion is:
(En	ner Name of Other Business Entity)
2. The "Other Business Entity" is	Florida corporation
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorpo	rated under the laws of the State of FLorida (Enter state, or if a non-U.S. entity, the name of the country)
January 20, 1763	
(date of organization, formation or in	corporation)
3. The name of the Florida Limite Francatby Limited, LLC	d Liability Company as set forth in the attached Articles of Organization
(Enter Namo	of Florida Limited Liability Company)
(The effective date: 1) cannot be date this document is filed by the date listed in the attached Article	ing, enter the effective date: prior to date of receipt or filed date nor more than 90 days after the Florida Department of State; AND 2) must be the same as the effective es of Organization, if an effective date is listed therein.) es not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
5. The plan of conversion has been	approved in accordance with all applicable statutes.

Page 1 of 2

Signed this 3 day of October	20 16	FILED
		545 445 4
Signature of Authorized Representative of Limi		
Signature of Authorized Representative: Printed Name: Frank Aliaga	11 Alub :	SFLOCIOLY OF STAIF
Printed Name: Frank Aliaga	Title Authorized Representa	tive AHASSEE, FLORIDA
Signature(s) on behalf of Other Business Entity:	See below for required sign	iature(s)
Signature: Printed Name: Frankalised		
Printed Name: Frank Aligent	Title: Director	
Signature:Printed Name:	Title	<u> </u>
Printed Name:	_ i ide:	
Signature:		
Signature:Printed Name:	Title:	harden de la companya del companya del companya de la companya de
Clamateur		
Signature:Printed Name:	Title:	
Timos Turno.	<u> </u>	
Signature:Printed Name:		
Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
15 m - 1 - 0 - 11		•
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer	
If Directors or Officers have not been selected, an Inc		
	·	
If Florida General Partnership or Limited Liabili	ty Partnership:	
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:	
Signatures of ALL General Partners.		
4 ll othore		
All others: Signature of an authorized person.		
(
Fees:		
Articles of Conversion:	\$25.00	
Fees for Florida Articles of Organization:	\$125.00 \$125.00	
Certified Copy:	\$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is	:	
Francalby Limited, LLC		
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
17381 Morris Bridge Road	P.O. Box 740347	
Thonotosassa, Florida 33592	Boynton Beach, Florida 3347	/4-0347
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the talking J. Ciklin	tered Agent. You must designate an i	
Name	e	
515 N. Flagler Drive, 20th Floor		
Florida street address (P.O		
West Palm Beach	FL 33401	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete accept the obligations of my position as resulting the control of the proper and complete accept the obligations of the proper accept the proper accept the obligations of the proper accept t	n this certificate, I hereby acc city. I further agree to compl performance of my duties, ar	cept the appointment as ly with the provisions of all nd I am familiar with and
Registered Agent's Sign	nature (REQUIRED)	S Z
(CONTIN	TUED)	EL ARAS
Page 1 o	f2	8 - 8

The name and address of each person	authorized to manage and soutro	FILED	
Company:	authorized to manage and contro	2016 NOV -8 PM 3: 4	っ
<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	SECULIONY OF STATE TALEAHASSEE, FLORID	
MGR	Aliaga Family Revocable Trust		
	17381 Morris Bridge Road Thonotossa, Florida 33592		
	Thomacasa, Tiorna 33372		
		the state of the s	
		The state of the s	
(Use attachment if necessary) ARTICLE V: Effective date, if other than the conclusion (If an effective date is listed, the date must be to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of State's	e specific and cannot be more t e applicable statutory filing requiremen	han five business days prior	
ARTICLE VI: Other provisions, if any.			
	7) //		
REQUIRED SIGNATURE:			
This document is excepted in bcc	or an authorized representatively ordance with section 605.0203 (1) (b), the submitted in a document to the Depts provided for in s.817.155, F.S.	Florida Statutes.	
Frank Aliaga, Authorized Ro	Phrecentative		
	ed or printed name of signee	——————————————————————————————————————	
,,,,,	Filing Fees		
\$125.00 Filing Fee for Articles of		of Registered Agent	
\$ 30.00 Certified Copy (Optional	•	Status (Optional)	
	Page 2 of 2		