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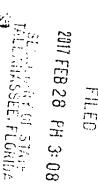
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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V HERRING MAR - 2 2017

COVER LETTER

TO:	*Registration S Division of C				
CHD		·	PROPERTIES, LL	С	
SUB	JECT:	(Name of Res	ulting Florida Lim	ited Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Pleas	se return all corre	espondence concerning	g this matter to		
JOHI	N S. BOHATCH, E	SQ.			
		(Contact Person)			
GUT	TENMACHER, BC	HATCH & PENARAND	A, P.A.		
		(Firm/Company)			
7301	SW 57TH CT SUI	ГЕ 560			
		(Address)			
sou	TH MIAMI, FL 331	143			
	((City, State and Zip Code)		_	
JBOI	натсн@бвртах	KLAW.COM			
Е	-mail Address: (to b	e used for future annual re	port notifications)		
For	further informati	on concerning this ma	tter, please call	;	
JOH	N S. BOHATCH		_at (666-	1040
	(Name of Conta	act Person)	(Area Cod	e) (Day	rtime Telephone Number)
		For the following amou a bank located in the	•	proces	sed by this office must be payable in US
(\$25 & \$1	150.00 Filing Fees for Conversion 25 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filir and Certified C		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Regi Divi Clift 2661	REET ADDRES istration Section sion of Corporat ton Building 1 Executive Cent ahassee, FL 323	ions er Circle	Regis Divis P. O.	tration ion of C Box 63	ADDRESS: Section Corporations 27 FL 32314

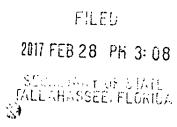
Articles of Conversion

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.

ì.	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: LINE PROPERTIES, INC. Po 4 - 122738
_	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a CORPORATION
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fi	rst organized, formed or incorporated under the laws of
on	AUGUST 24, 2004 (Enter state, or if a non-U.S. entity, the name of the country)
V.,	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: LINE PROPERTIES, LLC
_	(Enter Name of Florida Limited Liability Company)
4.	If not effective on the date of filing, enter the effective date:
da da <u>No</u>	The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the late this document is filed by the Florida Department of State; AND 2) must be the same as the effective late listed in the attached Articles of Organization, if an effective date is listed therein.) ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cument's effective date on the Department of State's records.
5.	The plan of conversion has been approved in accordance with all applicable statutes.
6.	The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 22 day of FEBRUARY	20_17	
Signature of Authorized Representative of Limit	ed Liability Company:	FILEO
Signature of Authorized Representative	market)	2017 FEB 28 PM 3: 08
Printed Name: LIDIA M. GAZTAMBIDE	Title: MANAGER	JALLAHASSEE FLORIDA
Signature(s) on behalf of Other Business Entity:	See below for required signature(s	
Signature:	<i>)</i>	
Printed Name: LIDIA M. GAZTAMBIDE	Title: PRESIDENT	
Signature:		
Printed Name:	_ Title:	
Signature:		
Printed Name:	Title:	
Signature: Printed Name:		
Printed Name:	_ Title:	
Signature:	T'd	
Printed Name:	Title:	
Signature:		
Printed Name:	Title	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Corporation	Officer	
If Directors or Officers have not been selected, an Inc		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion:	\$25.00	
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)	
Certificate of Status:	\$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
LINE PROPERT	IES, LLC
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
18321 SW 86TH AVENUE	18321 SW 86TH AVENUE
PALMETTO BAY, FL 33157	PALMETTO BAY, FL 33157
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the recommendation of the recommendation of the recommendation.	
LIDIA M. GAZTAMBIDE Name	
Florida street address (P.O.	Box NOT acceptable)
PALMETTO BAY	FL 33157
City	Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S
Registered Agent's Sign	ature (REQUIRED)
(CONTIN	UED)

<u>Title:</u> "AMBR" = Authorized Memb	Name and Address:	
"MGR" = Manager		
MGR	LIDIA M. GAZTAMBIDE	
	18321 SW 86TH AVENUE	
	PALMETTO BAY, FL 33157	
MGR	NELSON GAZTAMBIDE	2017
	18321 SW 86TH AVENUE	FE :
	DAIMETTO DAY EL 22167	
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(Use attachment if necessary)		
IF V. Effective data if other	than the data of films.	DTIONIAL
	than the date of filing: (Ole must be specific and cannot be more than five but	
days after the date of filing.)		isiliess uaj
	not meet the applicable statutory filing requirements, this date w	ill not be list
's effective date on the Department		

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.

LIDIA M. GAZTAMBIDE

REQUIRED SIGNATURE:

ARTICLE IV-

Typed or printed name of signee

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)

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