# 111000138474

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

Office Use Only



400300661754

06/26/17--01/35--0:5 \*\*1c5.4



JUN 2 8 2017 T SCHROEDER

# COVER LETTER

Division of Corporations SUBJECT: Farrow Communications, LLC (Name of Resulting Florida Limited Company) The enclosed Articles of Conversion. Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. Please return all correspondence concerning this matter to: Eric, C. Millhorn, Esq. (Contact Person) Millhorn Elder Law Planning Group, PLLC (Firm/Company) 11294 U.S. Highway 301 (Address) Oxford, Florida 34484 (City, State and Zip Code) dana@milthornlaw.com E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Eric C. Millhorn, Esq. at (352) 330-3366 (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees □\$155.00 Filing Fees □\$180.00 Filing Fees ■\$185.00 Filing Fees. (\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and & \$125 for Articles Status Certificate of Status of Organization) STREET ADDRESS: MAILING ADDRESS: New Filing Section **New Filing Section** 

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

3230L

Division of Corporations

2661 Executive Center

Circle Tallahassee, FL

Clifton Building

TO:

**New Filing Section** 

### **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.

	(Enter Name of Other Business Entity)
2. The "Other Business Entity"	Corporation
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or inco	rporated under the laws of Florida
April 15, 2016	(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation of	or incorporation)
3. The name of the Florida Lin Farrow Communications, LLC	nited Liability Company as set forth in the attached Articles of Organization:
(Enter N	ame of Florida Limited Liability Company)
4. If not effective on the date c	of filing, enter the effective date:
(The offective date: 1) suppo	t be prior to date of receipt or filed date nor more than 90 calendar days
after the date this document i the effective date listed in the Note: If the date inserted in this bloc	s filed by the Florida Department of State; <u>AND</u> 2) must be the same as attached Articles of Organization, if an effective date is listed therein.) k does not meet the applicable statutory filing requirements, this date will not be listed as the
after the date this document is the effective date listed in the Note: If the date inserted in this bloc document's effective date on the Dep.	s filed by the Florida Department of State; <u>AND</u> 2) must be the same as attached Articles of Organization, if an effective date is listed therein.) k does not meet the applicable statutory filing requirements, this date will not be listed as the
after the date this document is the effective date listed in the Note: If the date inserted in this bloc document's effective date on the Dep.  5. The plan of conversion has be 6. The "Converted or Other Busi	s filed by the Florida Department of State; AND 2) must be the same as attached Articles of Organization, if an effective date is listed therein.) k does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.

Signed this 19 day of Doe	
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name:	Title:
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Livet & Tarrow	Till Committee
Printed Name: Janet E. Farrow	Inte: Dec re facing
Signature: All A fazzow  Printed Name: Robert B. Garrow	Title: Prosident
Signature:Printed Name:	Title
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	
If Florida Corporation:	Title:
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	•
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

17 JUN 27 JUN 9: 24

SUPPLIFE THE

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Com	pany is:
Farrow Communications, LLC	
(Must contain the words "Limite	ed Liability Company, "L.E.C.," or "LLC.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is
The manning address and succe address,	of the principal office of the Elimited Flagmity Company is
Principal Office Address:	Mailing Address:
1007 Soledad Way	1007 Soledad Way
The Villages, Florida 32159	The Villages, Florida 32159
ARTICLE III - Registered Agent, Re The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
The name and the Florida street address	of the registered agent are:
Millhorn Elder Law Pla	unning Group, PLLC
	Name
11294 US Highway 30	I

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.

FL 34484

Zip

Registered Agent's Signature (REQUIRED)

Florida street address (P.O. Box NOT acceptable)

City

Oxford

	·	
"AMBR" = Authorized Member "MGR" = Manager		
HMOR	Robert B. Farrow	
	1907 solected way	
	The Villages, Florida 34	184
AMISK		
HISIOK	Janet E Farrow 1007 Sole had way	
	The Villages, Florida 344	84
	THE VITIGES, FIORIAG 314	01
(Use attachment if necessary)  ICLE V: Effective date, if other than the	ne date of filing: (OP	PTIONAL
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.)	ne date of filing:	isiness da
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.)  If the date inserted in this block does not meet the effective date on the Department of States	t be specific and cannot be more than five bu	isiness da
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.)  If the date inserted in this block does not meet the effective date on the Department of States	t be specific and cannot be more than five bu	isiness da
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.)  If the date inserted in this block does not meet the effective date on the Department of States	t be specific and cannot be more than five bu	isiness da
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.)  If the date inserted in this block does not meet the effective date on the Department of States	t be specific and cannot be more than five bu	isiness da
ICLE V: Effective date, if other than the effective date is listed, the date mus 90 days after the date of filing.)  If the date inserted in this block does not meet the effective date on the Department of States	t be specific and cannot be more than five bu	ill not be li
ICLE V: Effective date, if other than the effective date is listed, the date muse 90 days after the date of filing.) If the date inserted in this block does not meed then it's effective date on the Department of State ICLE VI: Other provisions, if any.	t be specific and cannot be more than five bu	ill not be li
ICLE V: Effective date, if other than the effective date is listed, the date muse 90 days after the date of filing.) If the date inserted in this block does not meed the effective date on the Department of State ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	t the applicable statutory filing requirements, this date wite statutory filing requirements.	ill not be li
ICLE V: Effective date, if other than the effective date is listed, the date muse 90 days after the date of filing.) If the date inserted in this block does not meed then it's effective date on the Department of State ICLE VI: Other provisions, if any.	t be specific and cannot be more than five bu	ill not be li
ICLE V: Effective date, if other than the effective date is listed, the date muse 90 days after the date of filing.)  If the date inserted in this block does not mee ment's effective date on the Department of State ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	the applicable statutory filing requirements, this date with a statutory filing requirements, this date with a statutory filing requirements.	ill not be li
ICLE V: Effective date, if other than the effective date is listed, the date muse 90 days after the date of filing.)  If the date inserted in this block does not meetent's effective date on the Department of State ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a memb This document is executed in	the applicable statutory filing requirements, this date with a specific and cannot be more than five but the applicable statutory filing requirements, this date with a records.	ill not be li
ICLE V: Effective date, if other than the effective date is listed, the date muse 90 days after the date of filing.)  If the date inserted in this block does not meetent's effective date on the Department of State ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a memb This document is executed in Japa aware that any false information.	the applicable statutory filing requirements, this date with a specific and cannot be more than five but the applicable statutory filing requirements, this date with a records.	ill not be li
ICLE V: Effective date, if other than the effective date is listed, the date muse 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 State ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a memb This document is executed in January after inforcemental any false inforcemental and false inforc	the applicable statutory filing requirements, this date with a specific and cannot be more than five but the applicable statutory filing requirements, this date with a records.	ill not be li

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)

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

ARTICLE IV-