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(R	equestor's Name)	
(A	ddress)	
	ddress)	
10.	adress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



900300114329

06/13/17--01020--018 **185.00

W17-U971 MILED FILED 6461 51 671

T. BURCH JUN 2 8 2017

COVER LETTER

Division of C			
SUBJECT: Ilona Ma	nagement, LLC		
		sulting Florida Limite	ed Company)
			on, and fees are submitted to convert an "Oth" in accordance with s. 605,1045, F.S.
Please return all corr	respondence concernin	g this matter to:	
James Varga			
	(Contact Person)		
Hona Managment			
	(Firm/Company)		
827 North Summerlin A	ve		
	(Address)	, , ,	
Orlando, FL 32803			
(City, State and Zip Code)		
jimvarga99@gmaif.com			
E-mail Address: (to l	oe used for future annual re	port notifications)	
For further informati	ion concerning this ma	tter, please call:	
James Varga		_at (407)	491-6786
(Name of Conta	act Person)		(Daytime Telephone Number)
	for the following amound a bank located in the		rocessed by this office must be payable in U
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	S180.00 Filing F and Certified Copy	
STREET ADDRES	S:	MAILI	NG ADDRESS:
New Filing Section			ling Section
Division of Corporat	ions		n of Corporations
Clifton Building 2661 Executive Cent	ter	P. O. Bo Tallahas	ox 6327 ssec. FL 32314
Deer intermitte Com		rananas	5000, 112 72/11

32301

Circle Tallahassee, FL



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 14, 2017

JAMES VARGA 827 NORTH SUMMERLIN AVE ORLANDO, FL 32803

SUBJECT: ILONA MANAGEMENT LLC

Ref. Number: W17000049774

We have received your document for ILONA MANAGEMENT LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Tim Burch Regulatory Specialist III

Letter Number: 117A00012030

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.

 The name of the "Other Bullona Management 	usiness Entity" immediately prior to the filing of the Articles of C	Conversion is:
	(Enter Name of Other Business Entity)	
2. The "Other Business Entity	y" is a LLC	
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or inc	corporated under the laws of New Jersey (Enter state, or if a non-U.S. entity, the name of	
6/29/2010	(Enter state, or if a non-U.S. entity, the name of	f the country)
on 6/29/2010 (date of organization, formation	n or incorporation)	
3. The name of the Florida Li flona Management, LCC	imited Liability Company as set forth in the attached Articles of	Organization
(Enter	Name of Florida Limited Liability Company)	
4. If not effective on the date	of filing, enter the effective date:	
(The effective date: 1) canno after the date this document the effective date listed in th	tot be prior to date of receipt or filed date nor more than 90 can total is filed by the Florida Department of State; AND 2) must be not attached Articles of Organization, if an effective date is listed ock does not meet the applicable statutory filing requirements, this date will no	the same as ed therein.)
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 9t	h day of June	20_17
Signature of	Authorized Representative of	Limited Liability Company:
		Q+10.10.1
Signature of A	Authorized Representative:	
Printed Name:	James Varga	Title: AMBR
		tity: [See below for required signature(s)]
Signature:	for I race	Title: Director
Printed Name	John Szigeti (Title: Director
Signature:		
Printed Name:		Title:
C:		
Drinted Nome:		Title:
rimed Name.		Truc
Signature		
Printed Name:		Title:
	-	
Signature:		
Printed Name:		Title:
Signature:		·
Printed Name:		Title:
	rporation: hairman, Vice Chairman, Directo Officers have not been selected.	
	neral Partnership or Limited L ne General Partner.	iability Partnership:
	nited Partnership or Limited L ALL General Partners.	iability Limited Partnership:
All others: Signature of a	n authorized person.	
Fees:		
Article	es of Conversion:	\$25.00
	or Florida Articles of Organizat	
	led Copy:	\$30.00 (Optional)
	icate of Status:	\$5.00 (Optional)
Centil	www.tri.t/stastas/s	Joo (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ilona Management	LLC	
	Must contain the words "Limited Liah	ility Company, "L.L.C.," or "L.L.C.,")
ARTICLE II	Address:	
		principal office of the Limited Liability Company i
Principal Office	e Address:	Mailing Address:
-		
827 North Summer	lin Ave	827 North Summerlin Ave
		·- · · · · · · · · · · · · · · · · · ·
Orlando, FL 32803 ARTICLE III - The Limited Liability	Registered Agent, Registe	Oriando, Fl. 32803 red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another
Orlando, FL 32803 ARTICLE III - The Limited Liability business entity with	Registered Agent, Registe y Company cannot serve as its own Re an active Florida registration.) he Florida street address of th	red Office, & Registered Agent's Signature: ogistered Agent. You must designate an individual or another
Orlando, FL 32803 ARTICLE III - (The Limited Liability business entity with	Registered Agent, Registe y Company cannot serve as its own Re an active Florida registration.) ne Florida street address of the James Varga	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another se registered agent are:
Orlando, FL 32803 ARTICLE III - (The Limited Liability business entity with	Registered Agent, Registe y Company cannot serve as its own Re an active Florida registration.) ne Florida street address of the James Varga	red Office, & Registered Agent's Signature: ogistered Agent. You must designate an individual or another
Orlando, FL 32803 ARTICLE III - (The Limited Liability business entity with	Registered Agent, Registe y Company cannot serve as its own Re an active Florida registration.) ne Florida street address of the James Varga	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another se registered agent are:
Orlando, FL 32803 ARTICLE III - (The Limited Liability business entity with	Registered Agent, Registe y Company cannot serve as its own Re an active Florida registration.) ne Florida street address of the James Varga No	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another se registered agent are:
Orlando, FL 32803 ARTICLE III - (The Limited Liability business entity with	Registered Agent, Registe y Company cannot serve as its own Re an active Florida registration.) ne Florida street address of the James Varga No	red Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another are registered agent are:

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

A	RTI	C1	L.	W
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The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager AMBR	James Varga	
AWDK	827 North Summerlin Ave	_
	Orlando, FL 32803	<u> </u>
	Orlando, FL 52803	_
AMBR	Ilona Szigeti	
	827 North Summerlin Ave	_
	Orlando, FL 32803	_
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an effective date is listed, the date mus or to or 90 calendar days after the date	the applicable statutory filing requirements, this date will n	siness days
RTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:		
Jove.		_
Signature of a member This document is executed in a I am aware that any false inform	er or an authorized representative of a member accordance with section 605.0203 (1) (b), Florida Statutes, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.	_ r.
Signature of a member This document is executed in a Lam aware that any false information constitutes a third degree felonguates.	er or an authorized representative of a member accordance with section 605.0203 (1) (b), Florida Statutes, mation submitted in a document to the Department of State	 r.

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)