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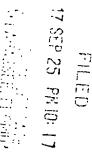
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office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



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COVER LETTER

| TO: New Filing So Division of C | | | | |
|--|---|------------------------------------|---------|---|
| SUBJECT: TREASU | RE COAST TITLE & ESC | CROW, LLC | | |
| 501001.011 | (Name of Res | ulting Florida Limite | d Comp | pany) |
| | | | | fees are submitted to convert an "Other cordance with s. 605.1045, F.S. |
| Please return all corre | espondence concerning | g this matter to: | | |
| FRANK H. FEE, III. ES | QUIRE | | | |
| | (Contact Person) | | | |
| FEE, DeROSS & FEE, P | λ | | | |
| | (Firm/Company) | | | |
| 426 AVENUE A | | | | |
| | (Address) | | | |
| FORT PIERCE, FL 349 | 50 | | | |
| ((| City, State and Zip Code) | | | |
| CMOORE@FEEDEROS | SSFEE.COM | | | |
| E-mail Address: (to b | e used for future annual re | port notifications) | | |
| For further information | on concerning this ma | tter, please call: | | |
| FRANK H. FEE, III, ES | QUIRE | at (⁷⁷² | 461-50 | 20 |
| (Name of Conta | et Person) | (Area Code) | (Dayti | ime Telephone Number) |
| | or the following amou a bank located in the | | rocesse | ed by this office must be payable in US |
| \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | S155.00 Filing Fees and Certificate of Status | □\$180.00 Filing and Certified Cop | | ☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status |
| STREET ADDRESS | S: | MAILI | NG A | DDRESS: |
| New Filing Section | | New Fi | _ | |
| Division of Corporat | ions | Divisio P. O. B | | orporations |
| Clifton Building 2661 Executive Cent | er Circle | | | / L 32314 |

Tallahassee, FL 32301

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

77 SEP 25 PH IO: 17

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.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: TREASURE COAST TITLE & ESCROW, INC. |
|---|
| (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. |
| First organized, formed or incorporated under the laws of |
| January 19, 1977 |
| (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| TREASURE COAST TITLE & ESCROW, LLC |
| (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document'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 | day of August | 20 <u>17</u> |
|-------------------------------------|--|-------------------------------------|
| Signature of Au | thorized Representative of Limi | ted Liability Company: |
| C* | horized Representative: | al fee 2 |
| Signature of Aut | ANK H FUL III | Title: MANAGER |
| Printed Name: 115 | ANK H. FEE, III | Title: Marketik |
| Signature(s) op- | behalf of Other Business Entity: | See below for required signature(s) |
| Signature: Signature: | tu de | |
| Signature: | The contract of the contract o | DINEGTON (CPO |
| Printed Name: FF | ANK H. FEE, III | Title: DIRECTOR/CEO |
| Sionature: | | |
| Printed Name: | | Title: |
| | | |
| Signature: | | |
| Printed Name: | | Title: |
| C' | | |
| Signature: | | Title: |
| rimed Name | | i ric. |
| Signature: | | |
| Printed Name: | | Title: |
| | | |
| Signature: | | Title: |
| Printed Name: | | Title: |
| If Florida Corpo | oration: | |
| | irman, Vice Chairman, Director, or | Officer. |
| If Directors or O | fficers have not been selected, an In | corporator must sign. |
| | | |
| If Florida General Signature of one | ral Partnership or Limited Liabili | tv Partnership: |
| Signature of one | General Partner. | |
| If Florida Limit | ed Partnership or Limited Liabili | ty Limited Partnership: |
| | L General Partners. | |
| _ | | |
| All others: | | |
| Signature of an a | uthorized person. | |
| Fees: | | |
| Articles | of Conversion: | \$25.00 |
| | Florida Articles of Organization: | \$125.00 |
| Certified | _ | \$30.00 (Optional) |
| | te of Status: | \$5.00 (Optional) |
| | | - |

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is | : |
|--|---|
| TREASURE COAST TITLE & ESCROW, LLC (Must contain the words "Limited Liabili | ty Company, "L.L.C.," or "LLC.") |
| · | , |
| ARTICLE II - Address: The mailing address and street address of the p | rincipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 426 AVENUE A | 426 AVENUE A |
| FORT PIERCE, FLORIDA 34960 | FORT PIERCE, FLORIDA 34960 |
| | |
| ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) | d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another |
| The name and the Florida street address of the | registered agent are: |
| FRANK H. FEE, III | |
| Nam | ne |
| 426 AVENUE A | |
| Florida street address (P.C | D. Box NOT acceptable) |
| FORT PIERCE | FL 34950 Zip |
| City | Zip |
| liability company at the place designated i registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re | to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S |
| Registered Agent's Sig | nature (REQUIRED) |

(CONTINUED)

| Title: | Name and Address: | | |
|---|--|-------------------|--|
| "AMBR" = Authorized Member | | | |
| "MGR" = Manager | 20 1147 H 200 H | | |
| MGR | FRANK H. FEE, III | | |
| | 426 AVENUE A FORT PIERCE, FLORIDA 34950 | | |
| | FORT PIERCE, PLORIDA 34930 | | |
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| | 9. | | |
| (Use attachment if necessary) | ्रिक्ट स्टब्स्ट | 1 | |
| CLE V: Other provisions, if any. | | | |
| | | | |
| | | | |
| REQUIRED SIGNATURE: | -, 2 | | |
| This document is executed in accordance | an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am awament to the Department of State constitutes a third degree | re that felony | |
| | <i>ic</i> · | | |
| FRANK H. FEE. UL MEMBER | Fair | | |
| FRANK H. FEE, III, MEMBER Ty | ped or printed name of signee | | |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

ARTICLE IV-