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|                         | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (KE                     | equestors Name)    |           |
| <del></del>             |                    |           |
| (Ac                     | ldress)            |           |
|                         |                    |           |
| (Ac                     | ldress)            |           |
|                         |                    |           |
| (Ci                     | ty/State/Zip/Phone | e #)      |
|                         |                    |           |
| PICK-UP                 | ☐ WAIT             | MAIL      |
|                         |                    |           |
| (Bu                     | isiness Entity Nan | ne)       |
|                         |                    |           |
|                         | ocument Number)    |           |
| ·                       | ,                  |           |
| Certified Copies        | Certificates       | of Status |
|                         |                    |           |
| <del></del>             |                    |           |
| Special Instructions to | Filing Officer:    |           |
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Office Use Only



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#### **COVER LETTER**

| W: New Filing S  | Section   |  |   |
|--|---|--|---|
| Division of C  | Corporations  |  |   |
| SUBJECT: CITYGA  | ATE HOMES, LLC  |  |   |
| <del></del>  |   | sulting Florida Limited                      | Company)  |
| The enclosed Article<br>Business Entity" into                        | es of Conversion, Artic<br>o a "Florida Limited L     | les of Organization,<br>iability Company" in | and fees are submitted to convert an "Oth accordance with s. 605.1045, F.S. |
| Please return all con  | respondence concernin                                 | g this matter to:                            |   |
| LEIGH STAFFORD   |   |  |   |
|  | (Contact Person)                                      |  |   |
| PRECISE PLANNING   |   |  |   |
|  | (Firm/Company)  |  |   |
| 430 E. TAYLOR ST.  |   |  |   |
|  | (Address)   | <del></del>                                  |   |
| RENO, NV 89502   |   |  |   |
| (  | City, State and Zip Code)                             |  |   |
| LEIGH@PRECISEPLA   | NNING.NET   |  |   |
| E-mail Address: (to l  | be used for future annual re                          | port notifications)                          |   |
| For further informati  | ion concerning this ma                                | tter, please call:                           |   |
| LEIGH STAFFORD   |   | at ( <sup>775</sup> ) <sup>84</sup>          | 18-6265   |
| (Name of Conta   | act Person)   |  | Daytime Telephone Number)   |
| Enclosed is a check to dollars and drawn or                          | for the following amou<br>a bank located in the       | int: (All checks proc<br>United States)      | essed by this office must be payable in US                                  |
| \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles | □\$155.00 Filing Fees<br>and Certificate of<br>Status | ☐\$180.00 Filing Fee<br>and Certified Copy   | s   |

#### STREET ADDRESS:

of Organization)

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### **MAILING ADDRESS:**

New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

### Articles of Conversion

For

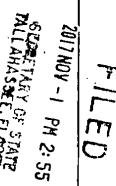
## "Other Business Entity"

Into

### Florida Limited Liability Company

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 Daviness Entity" in mediately microtake Clima of the Anti-Land Clauser's   |
|--|
| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: CITYGATE HOMES, LLC   |
| (Enter Name of Other Business Entity)  |
| 2. The "Other Business Entity" is a LLC FILED AS A FOREIGN LLC IN FLORIDA  |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)  |
| First organized, formed or incorporated under the laws of NORTH CAROLINA   |
| NOVEMBER 14, 2012 (Enter state, or if a non-U.S. entity, the name of the country)  |
| (date of organization, formation or incorporation)   |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  |
| CITYGATE HOMES, LLC  |
| (Enter Name of Florida Limited Liability Company)  |
| 4. If not effective on the date of filing, enter the effective date:   |
| (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.) |
| 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.  |
| Page 1 of 2  |



| Signed this 16TH                              | _day of _DECEMBER   | 20_16                                |                   |
|---|---|--------------------------------------|-------------------|
| Signature of Author                           | ized Representative of Limit  | ed Liability Company:                |                   |
| D:  | ed Representative:  | MMOS TON.                            |                   |
| Signature of Authoriz<br>Printed Name: CORINN | VE S. TESH  | - τημε Βρυςικέντε ΛΟΛ ενχίροσν ΙΑΝ   | lestors Inc,      |
| Timod Planto                                  |   |                                      | Manager           |
| Signature(s) on behal                         | f of Other Business Entity: [S  | See below for required signature(s)] |                   |
| $\sim$ $\sim$                                 | MAR STROK   |                                      |                   |
| Signature: CORINI Printed Name: CORINI        | VE S. TESH  | Title: PRESIDENT, OBO SYNERGY 1      | nuestors Inc,     |
| Timed Walle.                                  |   | Title: PRESIDENT, OBO SYNERGY 1      | Manager           |
| Signature:                                    |   |                                      |                   |
| <del></del>                                   |   | _Title:                              |                   |
|   |   |                                      |                   |
|   |   | Title                                | •                 |
| Printed Name:                                 |   | _ Title:                             | •                 |
| Signature:                                    |   |                                      | _                 |
|   |   | Title:                               | -                 |
|   |   | ·                                    |                   |
|   |   | Title:                               | -                 |
| Printed Name:                                 |   |                                      | -                 |
| Signature:                                    |   |                                      |                   |
|   |   |                                      | <del>-</del><br>- |
|   |   |                                      |                   |
| If Florida Corporati                          |   | 765.aa.                              |                   |
|   | n, Vice Chairman, Director, or (<br>rs have not been selected, an Inc |                                      |                   |
| II Ductions of Officer                        | s have not oven selected, an inc                                      | vorbotuor musi sign.                 |                   |
| If Florida General P                          | artnership or Limited Liabilit  | y Partnership:                       |                   |
| Signature of one Gene                         | eral Partner.   |                                      |                   |
| 1679 11 T1 14-479                             |   | by I imited Domboombins              |                   |
| Signatures of ALL G                           | artnership or Limited Liabilit<br>eneral Partners                     | y Linned Partnersnip:                |                   |
| orginatures or <u>ressu</u> o                 | chorar r arriors.   |                                      |                   |
| All others:                                   |   |                                      |                   |
| Signature of an autho                         | rized person.   |                                      |                   |
| Fees:   |   |                                      |                   |
| Articles of C                                 | onversion:  | \$25.00                              |                   |
|   | ida Articles of Organization:   | \$125.00                             |                   |
| Certified Cop                                 | _   | \$30.00 (Optional)                   |                   |
| Certificate of                                |   | \$5.00 (Ontional)                    |                   |

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - No.                                   | a <b>me:</b><br>Limited Liability Company  | is:  |   |
|---|--|--|---|
|   |  |  |   |
| CITYGATE HOME                                     |  | iability Company, "L.L.C.," or "LLC  | <del>"</del>  |
| (1  | ADS CIO WILL THE WOLDS ENTHER D  | nationally company, Education, or all  | ·   |
| ARTICLE II - A                                    | Address:   |  |   |
| The mailing addr                                  | ess and street address of th   | e principal office of the Lim  | ited Liability Company is:  |
| Principal Office                                  | Address:   | Mailing Address:   |   |
| ence provide DOAD                                 |  | 5755 PEAK ROAD   |   |
| 5755 PEAK ROAD<br>RENO, NV 89510                  |  | RENO, NV 89510   | <del></del>   |
| KENO, 117 89310                                   |  | 10010,117 02212  |   |
| (The Limited Liability business entity with a     | Company cannot serve as its own I active Florida registration.)  e Florida street address of   | ered Office, & Registered A<br>Registered Agent. You must designate<br>the registered agent are: | an individual or another  |
|   | INCORP SERVICES, INC.  |  |   |
|   |  |  | -   |
|   |  |  |   |
|   | 17888 67TH COURT NOR   | ·····  | -   |
|   | Florida street address   | (P.O. Box <u>NOT</u> acceptable)   |   |
|   | LOXAHATCHEE  | FL 33470   | _   |
|   | City   | Zip  | ]   |
| liability cor<br>registered age<br>statutes relat | mpany at the place designate int and agree to act in this coining to the proper and compobligations of my position of the colory accelery. | ted in this certificate, I hereby  | smply with the provisions of all ss, and I am familiar with and sed for in Chapter 666, F.S  Services, Inc. |
|   | (CON   | TINUED)  | PH 2: 55  |
|   | Pa   | ge 1 of 2  | 55  |
|   |  |  |   |

| Citle:  | Name and Address:   |
|---|---|
| AMBR" = Authorized Member   |   |
| MGR" = Manager  | OLO TO OLI DI ANCIONI DI UCCTARI. DIA   |
| MGR   | SYNERGY PROPERTY INVESTORS, INC.  |
|   | 5755 PEAK ROAD  |
|   | RENO, NV 89510  |
|   |   |
| <del></del>   |   |
|   |   |
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| LE V: Effective date, if other the fective date is listed, the date is  | in the date of filing: (OPTIONAL nust be specific and cannot be more than five business da  |
| fective date is listed, the date in days after the date of filing.) the date inserted in this block does not 's effective date on the Department of   | n the date of filing: (OPTIONAL nust be specific and cannot be more than five business dameet the applicable statutory filing requirements, this date will not be listate's records.  |
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| LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.) the date inserted in this block does not 's effective date on the Department of LE VI: Other provisions, if any.  REQUIRED SIGNATURE:   | must be specific and cannot be more than five business do meet the applicable statutory filing requirements, this date will not be listate's records.   |
| LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.) he date inserted in this block does not 's effective date on the Department of LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a me This document is executed an aware that any false   | nust be specific and cannot be more than five business da   |
| LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.) he date inserted in this block does not is effective date on the Department of LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a mean This document is executed an aware that any false | meet the applicable statutory filing requirements, this date will not be listate's records.  The ember or an authorized representative of a member. End in accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State felony as provided for in s.817.155, F.S. |