L17000234658

(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:
<u> </u>

Office Use Only



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17 NOV 13 PM 2: 22

T. BURCH NOV 15 2017

COVER LETTER

TO: New Filing S Division of C				
SUBJECT. Gifford I	Properties & Management,	LLC.		
SUBJECT:		sulting Florida Limite	d Com	pany)
		_		d fees are submitted to convert an "Othe cordance with s. 605.1045, F.S.
Please return all corr	respondence concernin	g this matter to:		
Andrew Gifford				
	(Contact Person)			
Gifford Properties & Ma	anagement, Inc.			
	(Firm/Company)			
4613 US Highway 17, S	STE 3			
	(Address)			
Fleming Island, FL 3200	03			
(City. State and Zip Code)	·		
agifford@giffordproper	ties.com			
E-mail Address: (to	be used for future annual re	port notifications)		
For further informat	ion concerning this ma	tter, please call:		
Andrew Gifford		_at (738-1	828
(Name of Cont	act Person)	(Area Code)	(Day	time Telephone Number)
	for the following amount a bank located in the		rocess	ed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	SS:	MAILI	NG A	DDRESS:
New Filing Section		New Fil	_	
Division of Corpora	tions			orporations
Clifton Building 2661 Executive Cen	ter Circle	P. O. Be Tallaha		7/ FL 32314
O		i wiidlith	, 1	

Tallahassee, FL 32301

Articles of Conversion For

"Other Business Entity"

Into

Florida Limited Liability Company

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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 Business Entity" immediately prior to the filing of the Articles of Conversion is: Gifford Properties & Management, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation (S-Corp) (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
05/08/2014 on .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Gifford Properties & Management, 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 10th day of November	20 <u>_17</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative of Limi Signature of Authorized Representative: Printed Name: Andrew Gifford	
Signature of Authorized Representative:	
Printed Name: Andrew Gifford	Title: Chairman
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: Andrew Gifford	Title: President / Incorporator
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Ciamatura	
Signature:Printed Name:	Title
Timed Name.	
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	o.m
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership.
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Farthership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$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:
Cifford Proportion R. Management LLC	
Gifford Properties & Management, LLC. (Must contain the words "Limited Liab	bility Company "L.L.C." or "LLC")
(Mast contain the words (Minted Black	ompany. Education face.
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4613 US Highway 17, STE 3	4613 US Highway 17, STE 3
Fleming Island, FL 32003	Fleming Island, FL 32003
business entity with an active Florida registration.) The name and the Florida street address of the Andrew Gifford Na	ne registered agent are:
4613 US Highway 17, STE 3	
Florida street address (P	P.O. Box NOT acceptable)
Fleming Island	FL 32003
City	Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all te performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-

as provided for in s.817.155, F.S.

Andrew Gifford

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 MGR	Andrew Gifford			
	4613 US Highway 17, STE 3			
	Fleming Island, FL 32003			
				
		-		
		<u> 14</u>	17	
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			3	
(Use attachment if necessary)		별성	3	
		S7.4 LOR	.;	
CLE V: Other provisions, if any.		D'Y D'Y	22	
REQUIRED SIGNATURE:				
6: 1	an authorized representative of a			

Typed or printed name of signee

any false information submitted in a document to the Department of State constitutes a third degree felony

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)