L18000018431

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
1
Special Instructions to Filing Officer:
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Office Use Only



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##-9 PH 2:22 JAN-9 PH 2:22 **COVER LETTER**

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TO: New Filing S Division of C				
SUBJECT:	Chalk (Name of Re	Point Realt sulting Florida Limited Con	pany)	
			d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.	
Please return all corr	espondence concernin	g this matter to:		
Virginia	Leith Gl	enn		
chalk s	Contact Person) Point Realt (Firm/Company)	ez, LLC		
9408 1	(Address)	Ct .		
	(Address)			
Chalkpoint E-mail Address: (to t	City, State and Zip Code) realty 0 i oe used for future annual re	cloud, can		
	on concerning this ma			
	_ ,	•	94-6987 or 727-514 time Telephone Number)	-9079
Enclosed is a check		unt: (All checks process	sed 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 Fees and Certified Copy	S185,00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES	S :	MAILING A	ADDRESS:	

New Filing Section
Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

INHS11 (7/17)

New Filing Section
Division of Corporations
Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 10, 2018

VIRGINIA LEITH GLENN 9408 HOLNWON CT HUDSON, FL 34667

SUBJECT: CHALK POINT REALTY, LLC

Ref. Number: W18000002456

We have received your document for CHALK POINT REALTY, 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 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: 918A00000593

www.sunbiz.org

DA DAY GOOD BUILDING

FILED

Articles of Conversion For "Other Business Entity" Into Into ALL ARASSEE, FLORIDA 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.

1. The name of the "Other Business Entity" Chalk Point Red	immediately prior to the f	iling of the Articles of Conversion is:
Chalk Point Rea	of Other Business Entity)	 -
2. The "Other Business Entity" is a	LLC	m16-6190 Il partnership, common law or business trust, etc.)
(Enter Chitty type: Example: Corpora	ation, firmed partitership, genera	r partnership, common law or ousmess trust, etc.)
First organized, formed or incorporated und	der the laws of	
		a non-U.S. entity, the name of the country)
on 4/3/2013 w M (date of organization, formation or incorporatio	1D / 8/2/2016	constered in FR as
(date of organization, formation or incorporatio	<u>n)</u>	poreign LCC
3. The name of the Florida Limited Liability Chark Point Realt (Enter Name of Florida		the attached Articles of Organization:
(Enter Name of Florida 4. If not effective on the date of filing, ente (The effective date: Cannot be prior to de	a Limited Liability Company)	9/2018 (upm receipt)
(The effective date: Cannot be prior to date the date this document is filed by the Flo Note: If the date inserted in this block does not mee document's effective date on the Department of Stat	rida Department of State the applicable statutory filing r	.)
5. The plan of conversion has been approve	d in accordance with all ap	plicable statutes.
The "Converted or Other Business Entity" which such members are entitled under ss.		

•	
Signed this 8 day of Janua	20 18
Signature of Authorized Representative	
Signature of Authorized Representative: Printed Name: Virginia Glenn	Virguia Cleur Tillo: Managing Member/Owner
Signature(s) on behalf of Other Business E	ntity: [See below for required signature(s)]
Signature: / / / / / / / / / / / / / / / / / / /	Kline 2011 Title: 7 MANAGING Mendser Journ
Signature:	11.00
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected.	ctor, or Officer.
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:
All others: Signature of an authorized person.	!
Fccs:	

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Chalk Point	Realty, LLC
(Must contain the words "Limited Liability Co	
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Company is:
Principal Office Address:	1ailing Address:
9408 HOLNWON CT Hudson, Fl 34667	9408 HOLNWON CT
Hudson, Fl 34667	9408 HOLNWON CT Hudson Fl 34667
(The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.) The name and the Florida street address of the registration of th	stered agent arc:
Florida street address (P.O. Bo	ox NOT acceptable)
Hud Son City	FL 34667 Zip
liability company at the place designated in thi registered agent and agree to act in this capacity. statutes relating to the proper and complete perf	cept service of process for the above stated limited s certificate. I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 605, F.S

(CONTINUED)

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		IV.

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

	· · · · · · · · · · · · · · · · · · ·
"AMBR" = Authorized Member "MGR" = Manager	
WOK - Wanager	
MER	Vivainia Glean
1001-	aux Holnum Ct
	HUDSON, FR 34667
•	
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	<u> </u>
(Use attachment if necessary)	
	4) (<u>\$</u>
L. C. V. Other provisions if any	
LE V: Other provisions, if any.	L ORIDA
LE V: Other provisions, if any.	0800A
LE V: Other provisions, if any.	ORIDA
	ORIDA
REQUIRED SIGNATURE:) COA
REQUIRED SIGNATURE:	una Alum
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance	an) authorized representative of a member with section 605.0203.(1) (b), Florida Statutes, I am aware the
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance	an authorized representative of a member
Signature of a member or This document is executed in accordance any talse information submitted in a docur as provided for in s.817.155, F.S.	an) authorized representative of a member with section 605.0263-(1) (b), Florida Statutes. I am aware the nent to the Department of State constitutes a third degree felorical section (1).
Signature of a member or This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	an) authorized representative of a member with section 605.0263 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree fellonia of printed name of signee
Signature of a member or This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	an) authorized representative of a member with section 605.0263 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree fellows.