# 118000033511

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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# **COVER LETTER**

ТО:	New Filing Son Division of C							
SUBJ	FCT: PENTAG	ON PARTNERS SOUTH	WEST, LLC					
3000	<u></u>	(Name of Res	sulting Florida	Limited Con	npany)	<del></del>		
					d fees are submitted to coordance with s. 605			ther
Please	return all corre	espondence concernin	g this matter	to:				
місн	AEL J. MARSHA	LL						
		(Contact Person)						
HUCK	BOUMA, PC					리		
		(Firm/Company)				E E	18	
1755 S	. NAPERVILLE I	ROAD, STE. 200				1	18 FEB	}
		(Address)				55.	9-	 
WHEA	TON, IL 60189					ASSEC FEORIDA	<b>P</b>	7
	((	City, State and Zip Code)	·			15 17 (A)	ယ္	
MMAI	RSHALL@HUCK	BOUMA.COM				200	· ·	
E-m	nail Address: (to b	e used for future annual re	port notificatio	ns)		<b>&gt;</b>	_	
For fu	rther information	on concerning this ma	tter, please c	all:				
місн	AEL J. MARSHA	LL	at ( 630	221-1	1755			
	(Name of Conta	ct Person)	at ((Area C	Code) (Day	rtime Telephone Number)			
		or the following amou a bank located in the	ınt: (All chec	ks process:	sed by this office must		ole in	US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles mization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 F and Certified		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
New F Division Clifton 2661 F	ET ADDRESS Filing Section on of Corporation Building Executive Center assee, FL 3230	ions er Circle	Ne Div P. (	w Filing S vision of C O. Box 631	Corporations			

### **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 Business Entity" immediately prior to the filing of the Articles of Conversion is PENTAGON PARTNERS, LLC	::
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY	<del></del> -
(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)	
FEBRUARY 4, 2014	
(date of organization, formation or incorporation)	
The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizati	on:
PENTAGON PARTNERS SOUTHWEST, LLC	
(Enter Name of Florida Limited Liability Company)	
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 a	fter
he 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 to locument's effective date on the Department of State's records.	ie
The plan of conversion has been approved in accordance with all applicable statutes.	
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amoun which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.</li> </ol>	t to



Signed this 79th day of January	20_18			
Signature of Authorized Representative of Lim				
Signature of Authorized Representative: Down Printed Name: DAN IEL Joyce	C Jayren Title: MANAGER	_		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]			
Signature: DANIEL WOYCE	Title: MANAGER	_		
Signature: Printed Name:	Title:	-		
Signature:Printed Name:	Title:	- -		
Signature: Printed Name:	Title:	-		
Signature:Printed Name:				
Signature:Printed Name:	Title:	<u>-</u>		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In				
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.			18 FEE	:
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.			3 - 6 P	; ~
All others: Signature of an authorized person.		FEORIES	PM 3: 1	
Fees:		<b>3</b> 2		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)			

ARTICLE I - Name: The name of the Limited Liability Company	y is:	
PENTAGON PARTNERS SOUTHWEST, LLC		
(Must contain the words "Limited Li	iability Cumpany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of th	ne principal office of the Limited I	Liability Company is:
Principal Office Address:	Mailing Address:	
23830 WEST MAIN STREET	23830 WEST MAIN STREET	
PLAINFIELD, IL 60544	PLAINFIELD, IL 60544	
		· · · · · · · · · · · · · · · · · · ·
ARTICLE III - Registered Agent, Registed (The Limited Liability Company cannot serve as its own Foundations entity with an active Florida registration.)		
The name and the Florida street address of t	the registered agent are:	
FLORIDA FILING & SEAF	RCH SERVICES, INC.	
N	Jame	
155 OFFICE PLAZA DRIV	E	
Florida street address (	P.O. Box <u>NOT</u> acceptable)	
TALLAHASSEE	F <u>L</u> 32301	
City	Zip	
Having been named as registered agent as liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and comple accept the abligations of my position a.  Registered Agent's second	ed in this certificate, Thereby accept apacity. I further agree to comply wellet tete performance of my duties, and	of the appointment as with the provisions of all I am familiar with and
		$\mathbb{Z}_s$ $ ightharpoonup$
(CONT	TINUED)	8 FEB -6 PM 3: 11 LLAWASSEE, FLORIDA

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ΑF	≀TI	CI	Æ	IV-

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

<u>Title:</u>	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager	DATRICK C. MARROLIN			
MGR	PATRICK C. HARBOUR		_	
	23830 WEST MAIN STREET		_	
	PLAINFIELD, IL 60544		_	
MGR	DANIEL JOYCE			
	8787 BAY COLONY DRIVE UNIT 40			
	NAPLES, FL 34103		_	
MGR	ROGER CURRAN			
	23830 WEST MAIN STREET	<del></del>		
	PLAINFIELD, IL 60544			
			<del></del>	
		- -	_ _	
(Use attachment if necessary)			18 FEB :	
ARTICLE V: Other provisions, if any.	ි. විසිදු අපි	<b>4</b> j~.	-6 PM	117
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### **REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

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)