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| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Na | me) |
| (Do | cument Number |) |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: New Filing Division of | Section Corporations | | |
|--|---|--|---|
| SUBJECT: | CONVERSIO | N | |
| | | sulting Florida Limited Con | npany) |
| | | | id fees are submitted to convert an "Other coordance with s. 605.1045, F.S. |
| Please return all co | rrespondence concernin | g this matter to: | |
| FERNANDO S MORI | EIRA | | |
| | (Contact Person) | | |
| FM PROPERTY MAN | RAGEMENT | | |
| | (Firm/Company) | | |
| 11824 CAMDEN PAR | K DR | | |
| | (Address) | | |
| WINDERMERE - FL | - 34786 | | |
| | (City, State and Zip Code) | · · · · · · · · · · · · · · · · · · · | |
| fmpropmgmt@gmail. | com | | |
| E-mail Address: (to | be used for future annual re | port notifications) | |
| For further informa | ition concerning this ma | tter, please call: | |
| Fernando S Moreira | | _at (407)4 | 66 1924 |
| (Name of Cor | itaci Person) | (Area Code) (Day | ytime Telephone Number) |
| | for the following amound a bank located in the | | sed by this office must be payable in US |
| ■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | S S155.00 Filing Fees and Certificate of Status | ☐\$180.00 Filing Fees and Certified Copy | □\$185.00 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRE | | MAILING A | |
| New Filing Section | | New Filing S | |
| Division of Corpor Clifton Building | ations | Division of C P. O. Box 63 | |
| 2661 Executive Ce | nter Circle | Tallahassee, | |

Tallahassee, FL 32301

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.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion FM PROPERTY MANAGEMENT & CONSULTING, INC. | en is: |
|---|--------------|
| (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 to | trust, etc.) |
| First organized, formed or incorporated under the laws of | iry) |
| 10/20/2005 on . | |
| (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organiz | zation: |
| FM Property Management and Consulting, LLC | |
| (Enter Name of Florida Limited Liability Company) | |
| 4. If not effective on the date of filing, enter the effective date: | |
| 4. If not effective off the date of thing, effect the effective date. | |
| (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar day 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 document's effective date on the Department of State's records. | |
| (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar day 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 | |
| (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar day 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 document's effective date on the Department of State's records. | as the |

| Signed this 12 day of March | _ 20 <u>_18</u> |
|---|-------------------------------------|
| Signature of Authorized Representative of Limit | |
| Signature of Authorized Representative: Printed Name: Fernando S Moreira | Title: Chairman MENDER |
| Signature(s) on behalf of Other Business Entity: [S | See below for required signature(s) |
| Printed Name: FERWAYDO S MENEIRA | Title: Owner_ |
| Signature: | Title: |
| Signature: | |
| Printed Name: Signature: | |
| Signature:Printed Name: | |
| Signature: Printed Name: | |
| Signature:Printed Name: | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Clf Directors or Officers have not been selected, an Inc | |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner. | y Partnership: |
| If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners. | y Limited Partnership: |
| All others: Signature of an authorized person. | |
| Fees: | |

\$25.00

\$125.00

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

Articles of Conversion:

Certificate of Status:

Fees for Florida Articles of Organization: Certified Copy: 18 APR 23 ANII: IL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | imited Liability Compa | ıny is: |
|---|--|---|
| | FM Property Mangement: | and Consulting , LLC |
| (M) | ust contain the words "Limited | Liability Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Ac The mailing addre | | the principal office of the Limited Liability Company is: |
| Principal Office 2 | Address: | Mailing Address: |
| 11824 Camden Park Windermere - FL - 3 | | |
| (The Limited Liability C business entity with an | ompany cannot serve as its ow active Florida registration.) | stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another of the registered agent are: |
| | Fernando i | Moreira |
| | - CHARGO | Name |
| | | |
| | 11824 Ca | mden Park Dr |
| | | mden Park Dr s (P.O. Box <u>NOT</u> acceptable) |
| | | |
| | Florida street address | s (P.O. Box <u>NOT</u> acceptable) |

ARTICLE IV-

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

| "AMBR" = Authorized Member "MGR" = Manager | | | |
|--|-----------------------------------|--|--------------|
| MGR Manager | FERNANDO S MOREIRA | <u>. </u> | _ |
| | | | - |
| | | <u>-</u> | - |
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| (Use attachment if necessary) | | ۾ ٿ | |
| (ose attachment is necessary) | | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | 8 APR |
| CLE V: Other provisions, if any, | | | \sim |
| THIS FILLING IS A CONVERSION FROM AN | CORPORATION TO AN LLC | शु .सः ११ | رب س |
| | | | <u> </u> |
| | | | |
| REQUIRED SIGNATURE: | | ₹5° | 1 |
| The Windows | | | _ |
| Signature of a member or an | authorized representative of a me | ember | - |

FERNANDO S MOREIRA

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)