U8000 164193

(Requestor's Name)			
(Add	ress)		
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(City	/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	iness Entity Nar	me)	
(Doc	ument Number)		
Certified Copies	Certificates	s of Status	
Special Instructions to F	iling Officer;		

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18 JUL -5 AMIL: 57 SECRETARY OF STATE TALL SHASSEE, FLORIDA

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T SCHROEDER

COVER LETTER

TO:	New Filing Son Division of C				
CHD	JECT: Unforgett	•			
SUD	ECT	(Name of Res	ulting Florida Limit	ed Cor	npany')
					nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this matter to:		
Linda	R. Mitchell				
		(Contact Person)			
Unforg	gettable Homes, LI	.C			
<u> </u>		(Firm/Company)			
3534 /	A Gardens East Dr				
		(Address)			
Palm l	Beach Gardens, Flo	orida 33410			
	((City, State and Zip Code)	-		
LRMit	tcheil.realtor@gma	il.com			
E-r	mail Address: (to b	e used for future annual re	port notifications)		
For fu	urther informati	on concerning this ma	tter, please call:		
Linda	R. Mitchell		_at (301-7	7209
	(Name of Conta	ct Person)			vtime Telephone Number)
		or the following amou a bank located in the	•	roces:	sed by this office must be payable in US
(\$25 fc & \$12:		\$155.00 Filing Fees and Certificate of Status			☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
New Divis Clifto	EET ADDRES Filing Section ion of Corporat on Building Executive Cent	ions	New Fi Divisio P. O. B	ling S n of C ox 63	Corporations

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

nto

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 is: Unforgettable Homes, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Domestic Limited-Liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Nevada (Enter state, or if a non-U.S. entity, the name of the country)
5/27/2015 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:
Unforgettable 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: Cannot be prior to date of receipt or filed date non-more than 00 calendar days of 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 13 day of April	20_18
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:Printed Name: Linda R. Mitchell	Title: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Mila R Mitche II	Tills: Marza az F
Signature: Printed Name: Kachel Those herger	Title: Manyor
Signature: Printed Name:	
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

FILED

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Unforgettable Homes, LLC.	
(Must contain the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3534 A Gardens East Dr.	3534 A Gardens East Dr.
Patm Beach Gardens	Palm Beach Gardens
Florida 33410	Florida 33410
The name and the Florida street address of the Raymond Eaton Na 9250 Alternate	egistered Agent. You must designate an individual or another the registered agent are: The AIA - Suite A P.O. Box NOT acceptable) Ch. FL. 33403 Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complete.	d to accept service of process for the above stated limited I 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
Registered Agent's S	ignature (REQUIRED)
(CONT	INUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Linda Milchell 3534 A Garden's East Dr Palm Beach Gardens Fl 334
mg R	Rachel Thanberger 8220 5 Vivginia Ave Polyn Beach Carlors 33408
(Use attachment if necessary)	SECRE FALLAH
TCLE V: Other provisions, if any.	ASSEE, FLO
	RIDA RIDA
REQUIRED SIGNATURE:	? M. L. J. L.
This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S.	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Lida R Mit	L-c
Ту	ped 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)