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Office Use Only

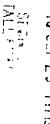
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# **COVER LETTER**

LD, LLC (Name of Resul	ting Florida Limite	d Com			
(Name of Resul	ting Florida Limite	d Co-			
		u Con	ipany)		
Conversion, Article Florida Limited Lial	s of Organizatio bility Company	n, an 'in ac	d fees are submitted to c ecordance with s. 605.10	onvert an "O 45, F.S.	ther
ndence concerning	this matter to:				
ontact Person)					
TIONAL, INC.					
irm/Company)					
(Address)					
State and Zip Code)					
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for future annual repo	nt notifications)				
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•	at ( <sup>863</sup>	968-10	010		
son)	(Area Code)	(Dayt	ime Telephone Number)		
e following amount nk located in the Ur	: (All checks pro nited States)	)cesse	ed by this office must be	payable in U	S
Certificate of a		tes	\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
	New Fili	ng Se			18 SEP :
	riorida Limited Lial indence concerning Contact Person) TIONAL, INC. irm/Company)  (Address)  State and Zip Code) X.COM d for future annual report concerning this matter rson) e following amount nk located in the Ur	riorida Limited Liability Company's indence concerning this matter to:  Contact Person) TIONAL, INC.  irm/Company)  (Address)  State and Zip Code) X.COM  d for future annual report notifications) oncerning this matter, please call:	riorida Limited Liability Company" in acondence concerning this matter to:  Contact Person) TIONAL, INC.  irm/Company)  (Address)  State and Zip Code) X.COM  d for future annual report notifications) concerning this matter, please call: at (863968-16at (Area Code) (Dayte following amount: (All checks processed in the United States)  155.00 Filing Fees	riorida Limited Liability Company" in accordance with s. 605.10  Indence concerning this matter to:  Contact Person)  TIONAL, INC.  irm/Company)  (Address)  State and Zip Code)  X.COM  Indence concerning this matter, please call:	Indence concerning this matter to:  Contact Person) TIONAL, INC.  Irm/Company)  (Address)  State and Zip Code) X.COM  d for future annual report notifications)  Oncerning this matter, please call:

INH\$11 (7/17)

## **Articles of Conversion**

For

## "Other Business Entity"

Into

## Florida Limited Liability Company

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 f VILLA-WORLD, LLP	11105003169
(Enter Name of Other Business Entity)	·
2. The "Other Business Entity" is a LIMITED LIABILITY PARTNERSHIP	
(Enter entity type. Example: corporation, limited partnership, genera	I partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of	a non-U.S. entity, the name of the country)
MAY 16TH, 2005	,
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in t VILLA-WORLD, LLC	the attached Articles of Organization:
(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 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 no document's effective date on the Department of State's records.	.)
5. The plan of conversion has been approved in accordance with all app	plicable statutes.
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members which such members are entitled under ss. 605.1006 and 605.1061-605</li> </ol>	pers having appraisal rights the amount to 5.1072, F.S.
	TALL REP 23
	<b>70</b>

Signed this 29TH day of AUGUST	20 <u>18</u>			
Signature of Authorized Representative of Lin	nited Liability Company:			
Signature of Authorized Paragraphs				
Signature of Authorized Representative: Printed Name: STEPHEN FRIEZE	Cal Control Danzago			
A Tilliand Training, a service of the service of th	Title: GENERAL PARTNER			
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]			
Signature: Alle				
Signature:	Title: AUTHORIZED MEMBER/MGR			
Signature:				
Printed Name:	Title:			
Signature:				
Printed Name:	Title:			
Signature:Printed Name:	70".1			
THROW HAIRC.	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 In	Officer.			
an in	icorporator must sign.			
M. Florida General Partnership or Limited Liabili	ity Partnership:			
Signature of one General Partner.				
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ity Limited Partnership:			
All others: Signature of an authorized person.				
Fees:		200		
		ΞĚ	63	
Articles of Conversion:	\$25.00		SEP	:
Fees for Florida Articles of Organization:	\$125.00	4 · ·	გე <b>ცე</b>	
Certified Copy:	\$30.00 (Optional)	-		<b></b>
Certificate of Status:	\$5.00 (Optional)		FH 12:	,
		44	<u> </u>	•
			Ca Ca	

IKTICLES OF ORGANIZATION FOR	K FLORIDA LIMITED LIABII	JIY COMPANY
ARTICLE I - Name: The name of the Limited Liability Compan	ıy is:	
VILLA-WORLD, LLC		-
(Must contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited I	Liability Company is:
Principal Office Address:	Mailing Address:	
213 SOUTH DILLARD ST, #330	213 SOUTH DILLARD ST, #33	30
WINTER GARDEN, FL 34787	WINTER GARDEN, FL 34787	
The name and the Florida street address of STEPHEN FRIEZE	Name	
213 SOUTH DILLARD ST	r #330	
	(P.O. Box NOT acceptable)	
WINTER GARDEN	FL_34787	
City	Zip	
Having been named as registered agent of liability company at the place designative registered agent and agree to act in this constatutes relating to the proper and compacted the obligations of my position of	ted in this certificate, I hereby accept apacity. I further agree to comply volete performance of my duties, and	of the appointment as with the provisions of all I am familiar with and
	// US	
Registered Agent's	Signature (REQUIRED)	<u>~</u>
(CON	ITINUED)	18 SEP 23 PHI
		* [2] 37

**ARTICLE 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		
AMBR/MGR	STEPHEN FRIEZE	
<del></del>	213 SOUTH DILLARD ST, #330	
	WINTER GARDEN, FL 34787	
AMBR/MGR	ELIZABETH FRIEZE	
	213 SOUTH DILLARD ST, #330	
	WINTER GARDEN, FL 34787	
	<u></u>	
•		
(Use attachment if necessary)		
( , , , , , , , , , , , , , , , , ,		
TCLE V: Other provisions, if any.		
, , , , , , , , , , , , , , , , , , ,		
REQUIRED SIGNATURE:		
	76-	
Signature of a member of	an and an and an	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that	
any false information submitted in a docum	ment to the Department of State constitutes a third degree felow	

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

STEPHEN FRIEZE

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent's \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional) \$\infty\$