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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:	New Filing S Division of C						
SHRI	ECT: Team Pr	operties. LLC					
000	LC1	(Name of Res	sulting Florida Limit	ed Con	npany)	-	
			_		d fees are submitted to decordance with s. 605.10		
Please	return all corr	espondence concernin	g this matter to:				
Michae	el Bautsir						
		(Contact Person)	· · · · · · · · · · · · · · · · · · ·				
Team	Properties, LLC						
	<u> </u>	(Firm/Company)					
645 Kr	ietemeyer Path						
	_	(Address)					
The Vi	llages, FL 3216	3-0089					
	((City, State and Zip Code)	_				
teampi	roperties@aol.ci	om					
E-m	nail Address: (to b	e used for future annual re	port notifications)				
For fu	rther informati	on concerning this ma	tter, please call:				
	el Baulsir	Č	•	. 908-4	1747		
	(Name of Conta	oct Person)	_at (301 (Area Code)) <u></u>	time Telephone Number)	-	
	(Name of Come	ict (ctson)	(Mea Code)	(Day	ame rerephone Number)		
		or the following amou a bank located in the		rocess	ed by this office must b	e payabl	e in US
(\$25 for & \$125	0.00 Filing Fees r Conversion for Articles nization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	 }=(<u></u> 4 \$50
New F Division Clifton 2661 I	ET ADDRES filing Section on of Corporat a Building Executive Cent assec, FL 323	ions er Circle	New Fi Divisio P. O. B	ling So n of C ox 632	orporations	- s,	18 00T 17 PR 12: hu

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 filling of the Articles of Conversion is: Team Properties, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
27 August 1998 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:
Team Properties. LLC TEEM PROPERTIES, 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 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 10	day of September	20 <u>18</u>
Signature of Auth	orized Representative of Limi	ted Liability Company:
Signature of Autho	arized Representative:	
Printed Name: Micha	rized Representative:aet Baulsir	Title: Sole Member
Signature(s) on be	half of Other Business Entity:	See below for required signature(s)
Signature:	CC m / Xa	Title: Sole Member MGR
Printed Name: Micha	ael Baulsir	Title: Sole Member MGR
Signature:		
Printed Name:		_ Title:
Signature:		Tule:
Printed Name:		Title:
Signature		
Printed Name:		Title:
Trinica Name		
Signature:		
Printed Name:		Title:
Signature:		That is
Printed Name:		Title:
If Florida Corpora	ation:	
	nan, Vice Chairman, Director, or	Officer.
If Directors or Offic	eers have not been selected, an in	corporator must sign.
If Florida General Signature of one Go	<u>Partnership or Limited Liabili</u>	ty Partnership:
Signature of one Cre	merai ranner.	
If Florida Limited	Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL		
All others:		
Signature of an auth	norized person.	
<u>Fees:</u>		
Articles of	Conversion:	\$25.00
	orida Articles of Organization:	\$125.00
Certified Co	•	\$30.00 (Optional)
Certificate	• •	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limit	ed Liability Compa	any is:	
Team Properties_LLC	TEEM	PROPERTIE	5, LLC
		Hiability Company, "L.t.C.," o	

ARTICLE II - Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:	
645 Krietemeyer Path	645 Krielemeyer Path	
The Villages, FL 32163-0089	Tne Villages, FL	-
		_
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)		
The name and the Florida street address of t	he registered agent are:	18 Q.
Michael Baulsir		
N	ame	المدار
645 Krietemeyer Path		70 724
Florida street address (P.O. Box NOT acceptable)	PH 12: 14'4
The Villages	FL_32163-0089	
City	Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"MGR" = Manager MGR	Michael Baulsir (sole member) 645 Krietemeyer Path The Villages, FL 32163-0089

(Use attachment if necessary)	иj
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE: Signature of a member or an	authorized representative of a member
This document is executed in accordance with	h section 605.0203 (1) (b). Florida Statutes. I am aware to the Department of State constitutes a third degree fel

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)