L18000188383

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(Business Entity Name)
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CORPORATION SERVIC 1201 Hays Street Tallhassee, FL 32 Phone: 850-558-150	301
	ACCOUNT NO.
	REFERENCE

AUTHORIZATION

549615

120000000195

7103152

ORDER DATE: December 18, 2018

ORDER TIME : 3:07 PM

ORDER NO. : 549615-005

CUSTOMER NO: 7103152

DOMESTIC AMENDMENT FILING

NAME: TRINITY COMMERCIAL GROUP, INC.

EFFECTIVE DATE:

ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER'S INITIALS:

P1100009812Z

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 is: Trinity Commercial Group, Inc.
(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 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)
October 25, 2011 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Trinity Commercial Group, LLC
<u>i</u>
(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 thi	s <u>18</u>	day of December	20 <u>18</u> .
Signature	of Author	ized Representative of Limi	ted Liability Company:
Signature Printed Na	of Authoriz	zed Representative:	Title: Authorized Representative
Signature	(s) on beha	If of Other Business Entity:	[See below for required signature(s)]
ے :Signature			
Printed Na	me: Daniel S	. O'Berski	Title: President
Signature			
Printed Na	me:		Title:
Signature:			Title:
Timed Na	<u> </u>		
Signature:			
Printed Na	me:		Title:
Signature:			
Printed Na	me:		Title:
C1			
Signature: Printed Nat	 me [,]		Title:
	Corporatio	-	0.07
		, Vice Chairman, Director, or (s have not been selected, an Inc	
II Directors	s of Officers	s have not been selected, an inc	corporator must sign.
		rtnership or Limited Liabili	ty Partnership:
Signature c	of one Gene	ral Partner.	
If Florida	Limited Pa	rtnership or Limited Liabilit	v Limited Partnership:
		neral Partners.	
4.11 .4			·
All others: Signature of	f an authori	zed person.	
Fees:			
Art	ticles of Co	nversion:	\$25.00
		la Articles of Organization:	\$125.00

Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:	
	· • · · · ·	
Trinity Commercial Group, LLC		
	Liability Company, "L.L.C.," or "LLC.")	
ADTICLE II Address.		
ARTICLE II - Address: The mailing address and street address of the mailing address and street address of the mailing address of the mailing address and street address.	the principal office of the Limited Liability Company i	ς.
<i>g</i>	The principal company is	٠.
Principal Office Address:	Mailing Address:	
9250 Corkscrew Road	9250 Corkscrew Road	
Suite 13	Suite 13	
Estero, FL 33928	Estero, FL 33928	
business entity with an active Florida registration.) The name and the Florida street address of Michael O'Berski	Registered Agent. You must designate an individual or another the registered agent are:	
9250 Corkscrew Road, Suit		
Florida street address	(P.O. Box <u>NOT</u> acceptable)	
Estero	FL 33928	
City	Zip	
liability company at the place designal registered agent and agree to act in this constantes relating to the proper and compaccept the obligations of my position of Registered Agent's	and to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of plete performance of my duties, and I am familiar with a cas registered agent as provided for in Chapter 605, F.S Signature (REQUIRED)	s fall nd
(CON	ITINUED)	

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Daniel S. O'Berski
	9250 Corkscrew Rd., Suite 13
	Estero, FL 33928
	
	
(Use attachment if necessary)	
LE V: Other provisions, if any.	<u>'</u>
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance	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
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. Daniel S. O'Berski, Authorized Represen	with section 605.0203 (1) (b), Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felony tative of Member
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. Daniel S. O'Berski, Authorized Represen	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony tative of Member bed or printed name of signee
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This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Daniel S. O'Berski, Authorized Representing Type	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony tative of Member ped or printed name of signee Filing Fees f Organization and Designation of Registered Agent