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(Cit	ty/State/Zip/Phone	e #1)	
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Special Instructions to	Filing Officer:		
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Office Use Only

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## COVER LETTER

SUBJECT: Jeff and I	Robin Properties LLC					
	(Name of Res	sulting I	lorida Limi	ted Cor	npany)	<del></del>
The enclosed Article Business Entity" into	s of Conversion, Artic o a "Florida Limited Li	les of iability	Organizati ⁄ Company	on, an /" in a	nd fees are submitted accordance with s. 60:	to convert an "Other 5.1045, F.S.
Please return all corr	espondence concernin	g this	matter to:			: <b>:::::</b> :
Robin Snell					•	
	(Contact Person)			-		75 18 T
Jeff and Robin Propertie	s LLC					
	(Firm/Company)			-		No F
23647 Via Carino Ln						强 · m
	(Address)			-		72
Bonita Springs, FL 3413	5					FILED PH 2: 47 SECRETARY FOR STATE
	City, State and Zip Code)			-		
jeffandrobinproperties@	gmail.com					
E-mail Address: (to b	e used for future annual re	port not	ifications)	-		
For further informati	on concerning this ma	tter, pl	ease call:			
Robin Snell		at ( <sup>2</sup>	18	791-7	7019	
(Name of Conta	ect Person)	(_	(Area Code)	(Day	7019 ztime Telephone Number	)
Enclosed is a check f dollars and drawn on	or the following amou a bank located in the	int: (A United	II checks p States)	roces		• -
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		80.00 Filing Tertified Cop		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status	Check is for 447.90 185-137.5, original check on fixe
STREET ÂDDRES	S:		MAIL	ING A	ADDRESS:	
New Filing Section			New Fi			
Division of Corporat	ions		Divisio	n of C	Corporations	
Clifton Building			P. O. B	ox 63:	27	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

**TO:** New Filing Section Division of Corporations

#### **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 i Jeff and Robin Properties LLC	5:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a limited liability company	
(Enter entity type, Example: corporation, limited partnership, general partnership, common law or business trus	t, etc.)
First organized, formed or incorporated under the laws of	
March 20, 2017 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizat	ion:
Jeff and Robin 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 a 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 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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	

Signed this 17 day of December		,
Signature of Authorized Representative of Limit	ed Liability Company:	
Signature of Authorized Representative: Printed Name: Robin Snell	Title: Owner/Officer	<b></b> -
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]	
Signature: Printed Name: Jeffrey Snell	Title: Owner/Officer	_ _
Signature:Printed Name:	The	_
Signature: Printed Name:	_ Title:	<del>-</del> -
Signature:	Trial	_
Printed Name:		
Signature: Printed Name:	_Title:	_ _
Signature:Printed Name:	Title	
	_ 11tic	<del>_</del>
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Clif 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 Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		FII 18 DEC 2 SECRETY
<u>Fees:</u>		Z8 PH
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	<b>12:43</b>

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Jeff and Robin Properties LLC		
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	winning office of the Limited	Liability Company is:
The mailing address and street address of the p	nncipal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
23647 Via Carino Ln	23647 Via Carino Ln	
Bonita Spring, FL 34135	Bonita Springs, FL 34135	<del></del>
2011 op. 118.		
ARTICLE III - Registered Agent, Registere	d Office, & Registered Agen	t's Signature:
(The Limited Liability Company cannot serve as its own Regisbusiness entity with an active Florida registration.)	stered Agent. You must designate an inc	iividuai or anomei
·		
The name and the Florida street address of the	registered agent are:	
Robin Snell		
Nam	ic	
23647 Via Carino Ln		
Florida street address (P.C	D. Box <u>NOT</u> acceptable)	
Bonita Springs	FL 34135	
City	Zip	
	to recent coming of process for	r the above stated limited
Having been named as registered agent and liability company at the place designated in	ii) accept service of process for in this certificate. Thereby acci	ent the appointment as
registered agent and agree to act in this capa	city. I further agree to comply	with the provisions of all
statutes relating to the proper and complete	performance of my duties, and	d I am familiar with and
accept the obligations of my position as re	egistered agent as provided for	· in Chaffer 665, F.S.,
	,	
10000	10	6 × N
	(DEOLUDED)	<b>公本 な</b>
Registered Agent's Sig	gnature (KEQUIKED)	ig 🗷 🔟
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(CONT)	NUED)	

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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	5 11 a N
MGR	Robin Snell
	23647 Via Carino Ln
	Bonita Springs, FL 34135
MGR	Jeffrey Snell
	23647 Via Carino Ln
	Bonita Springs, FL 34135
	·
	ĀS. <b>7</b>
<del></del>	FOR
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(Use attachment if necessary)	ST. 2
	SET
	ا به است. مراکز این است. مراکز این است.
CLE V: Other provisions, if any.	
	<u> </u>
REQUIRED SIGNATURE:	
30 - 50,010	
TOU MILL	
	r an authorized representative of a member
	e with section 605.0203 (1) (b), Florida Statutes. I am aware that ument to the Department of State constitutes a third degree felong
as provided for in s.817.155, F.S.	union to the Department of State constitutes a tillu degree feron
Robin Snell	
T	yped 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)