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(Requestor's Name)		
(Address)		
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bi	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

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COVER LETTER

TO: New Filing Division of	Section Corporations		
	ROOK PROPERTIES, LLC	2	
SUBJECT:		esulting Florida Limite	1 Company)
Business Entity II	eles of Conversion, Arti nto a "Florida Limited I rrespondence concerni	Liability Company"	n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
PAMELA BROOKS	,	ng ans mater to.	
- THATELA DROOKS	(Contact Person)		
ASHBROOK PROPE	•		
	(Firm/Company)		
526 KEMPTON PLAC	CE		
	(Address)		
THE VILLAGES, FLO	ORIDA 32162		
	(City, State and Zip Code)		
pbrookslka@gmail.com			
E-mail Address: (to	be used for future annual re	port notifications)	
For further informat	tion concerning this ma	itter, please call:	
Pamela Brooks			37-6407
(Name of Con	tact Person)		Daytime Telephone Number)
Enclosed is a check dollars and drawn or	for the following amount a bank located in the	ant: (All checks prod United States)	cessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	■\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fee and Certified Copy	Certificate of Status
STREET ADDRES	6S:	MAILING	G ADDRESS:
New Filing Section		New Filin	
Division of Corporat	tions	Division o	f Corporations
Clifton Building 2661 Executive Cent	ter Circle	P. O. Box	
Tailahaceae Et 222		Tallahasse	e, FL 32314

Tallahassee, FL 32301

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

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(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 trust, etc.)
First organized, formed or incorporated under the laws of
October 10,2007 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: ASHBROOK 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

- onversion 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 OG aday of February	20 <u></u>
Signature of Authorized Representative of Lin	
Signature of Authorized Representative: Printed Name: Pamela Brooks	<u> </u>
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Simulation	
Printed Name:	
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
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabili 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

O CHARLEATION TO	A FLORIDA LIVII I ED LIA	BILITY COMPANY
ARTICLE I - Name:		
The name of the Limited Liability Compa	ny is:	
ASHBROOK PROPERTIES, LLC		
	Liability Company, "L.L.C.," or "LLC.")	
	, ,, 220. ,	
ARTICLE II - Address:		
The mailing address and street address of t	the principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
526 Kempton Place	526 Kempton Place	
The Villages, FL 32162	The Villages, FL 32162	
business entity with an active Florida registration.) The name and the Florida street address of	the registered agent are:	
Pamela Brooks		
1	Name	
526 Kempton Place		
Florida street address	(P.O. Box NOT acceptable)	
The Villages		
City	FL 32162	
City	Zip	
Having been named as registered agent as liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and complete accept the obligations of my position as	ed in this certificate, I hereby acce pacity. I further agree to comply etc performance of my duties, are	ept the appointment as with the provisions of all
Registered Agent's	Signature (REQUIRED)	<u></u>
	Jane (Quindb)	
(CONT	TINUED)	MAR -4 PH
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The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Pamela Brooks 526 Kempton Place The Villages, FL 32162
(Use attachment if necessary)	(2) (2) (3)
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature of a member or an This document is executed in accordance wi any false information submitted in a document as provided for in s.817.155, F.S.	authorized representative of a member ith section 605.0203 (1) (b). Florida Statutes. I am aware that to the Department of State constitutes a third degree felon
- Pamila Bros	ser .

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)