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(Re	equestor's Name)	
(Ad	ldress)	· ·
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(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	n
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:	New Filing Se Division of Co				
CUB	IDOT: SUNBEL	ſ 2 PROPERTIES MANA	GEMENT LLC		
SOR	JECI:	(Name of Resu	ılting Florida Limite	1 Compar	ny)
The e	enclosed Articles ness Entity" into	of Conversion, Articl a "Florida Limited Lia	es of Organizatio ability Company"	n, and fo	ees are submitted to convert an "Other ordance with s. 605.1045, F.S.
Pleas	se return all corre	espondence concerning	this matter to:		
AND	Ү РНАМ				
_		(Contact Person)			
SUNI	BELT 2 PROPERT	IES MANAGEMENT LLO			
•		(Firm/Company)			
4805	N LOCUST GROV	'E RD			
_		(Address)			
MER	IDIAN, IDAHO 83	646			
	((City, State and Zip Code)			
AND	Y@SUNBELTPM	СОМ			
E-	-mail Address: (to b	e used for future annual re	port notifications)		
For f	further informati	on concerning this ma	tter, please call:		
APR	ILD DENNIS		at (208	501-898	9
-	(Name of Conta	ict Person)	(Area Code)	(Daytin	9 ne Telephone Number)
		or the following amou a bank located in the		ocessed	l by this office must be payable in US
(\$25 : & \$12	150.00 Filing Fees for Conversion 25 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy	, (■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New Divi Clift 2661	Filing Section sion of Corporation Building LExecutive Centahassee, FL 323	ions er Circle	New Fil Division P. O. Bo	ing Sec n of Cor ox 6327	porations

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: SUNBELT 2 PROPERTIES MANAGEMENT LLC MOR - 1406.
(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.)
(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)
3/24/2008
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SUNBELT 2 PROPERTIES MANAGEMENT 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.

\$5.00 (Optional)

Certificate of Status:

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SUNBELT 2 PROPERTIES MANAGEMENT LL	C	
(Must contain the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE П - Address:		
The mailing address and street address of the	the principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
4705 S DURANGO, STE 100	4805 N LOCUST GROVE RD	
LAS VEGAS, NV 89147	MERIDIAN, ID 83646	
ADTICLE III - Degistered Agent Regis		nt's Signature:
(The Limited Liability Company cannot serve as its own	stered Office, & Registered Age	nt's Signature:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agen n Registered Agent. You must designate an in	dividual or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agent Registered Agent You must designate an inf	dividual or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address o	stered Office, & Registered Agent Registered Agent You must designate an inf	dividual or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address o <u>C T CORPORATION SY</u>	stered Office, & Registered Agent Registered Agent Propriete Agent Propriete an in the registered agent are: STEM Name	idividual or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address o <u>CTCORPORATION SY</u> 1200 SOUTH PINE ISLA	stered Office, & Registered Agent Registered Agent Propriete Agent Propriete an in the registered agent are: STEM Name	idividual or another
The name and the Florida street address o C T CORPORATION SY 1200 SOUTH PINE ISLA	stered Office, & Registered Agen n Registered Agent. You must designate an in f the registered agent are: STEM Name NO ROAD	idividual or another

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)

<u>"itle:</u> AMBR" = Authorized Member	Name and Address:
MGR" = Manager 4GR	ANDY PHAM
NOK	4805 N LOCUST GROVE RD
	MERIDIAN, ID 83646
	- See
	[*·
	F-
	:/>
	
LE V: Other provisions, if any.	
REQUIRED-SIGNATURE:	
	all
(Clas) Ith	<u> </u>
Signature of a member	or an authorized representative of a member
Signature of a member of	or an authorized representative of a member
Signature of a member of	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am awar ocument to the Department of State constitutes a third degree
Signature of a member of This document is executed in accordary false information submitted in a document as provided for in s.817.155, F.S. ANDY PHAM	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am awar ocument to the Department of State constitutes a third degree
Signature of a member of This document is executed in accordary false information submitted in a document as provided for in s.817.155, F.S. ANDY PHAM	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes, I am awar ocument to the Department of State constitutes a third degree

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

ARTICLE IV-