L19000092740

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W4-29876

Office Use Only



300325877403

U3/18/19--01019--U29 **185.00

FILED
2019 APR -8 AH 10: 43
SECRETARY OF STATE

APR () 9 2019

K Brumbley

COVER LETTER

(Contact Person) Schiller Investments SF, LLC (Firm/Company) 3301 Bonita Beach Rd Ste 209 (Address) Bonita Springs, FL 34134 (City. State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) (Area Code) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees (S25 for Conversion S185.00 Filing Fees, and Certificate of and Certified Copy. Certified Copy. and	Division of Corp				
The enclosed Articles of Conversion. Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. Please return all correspondence concerning this matter to: Stephanie J. Schiller (Contact Person) Schiller Investments SF, LLC (Firm/Company) 3301 Bonita Beach Rd Ste 209 (Address) Bonita Springs, FL 34134 (City. State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees	SURJECT: SCHILLER I	NVESTMENTS SF LL	.C		
Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. Please return all correspondence concerning this matter to: Stephanie J. Schiller (Contact Person) Schiller Investments SF, LLC (Firm/Company) 3301 Bonita Beach Rd Ste 209 (Address) Bonita Springs, FL 34134 (City. State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees and Certified Copy. and	<u> </u>	(Name of Res	ulting Florida Limite	d Com	pany)
Schiller Investments SF, LLC (Firm/Company) 3301 Bonita Beach Rd Ste 209 (Address) Bonita Springs, FL 34134 (City. State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. at (239)351-1828 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Einclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees S155.00 Filing Fees and Certified Copy and					
(Contact Person) Schiller Investments SF, LLC (Firm/Company) 3301 Bonita Beach Rd Ste 209 (Address) Bonita Springs, FL 34134 (City. State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) (Area Code) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filling Fees (S25 for Conversion S185.00 Filling Fees, and Certificate of and Certified Copy. Certified Copy. and	Please return all corresp	ondence concerning	g this matter to:		
Schiller Investments SF, LLC (Firm/Company) 3301 Bonita Beach Rd Ste 209 (Address) Bonita Springs, FL 34134 (City, State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees (S25 for Conversion S185.00 Filing Fees and Certified Copy and	Stephanie J. Schiller				
(Firm/Company) 3301 Bonita Beach Rd Ste 209 (Address) Bonita Springs, FL 34134 (City, State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) at (239)351-1828 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees	(Contact Person)			
(Address) Bonita Springs, FL 34134 (City. State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. at (239)351-1828 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees S155.00 Filing Fees and Certified Copy and	Schiller Investments SF, LLG	C			
(Address) Bonita Springs, FL 34134 (City, State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees (S25 for Conversion Address: (152 for Conversion and Certificate of and Certified Copy. Certified Copy. and	(Firm/Company)			
Bonita Springs, FL 34134 (City, State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees (S25 for Conversion (City, State and Zip Code) (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)	3301 Bonita Beach Rd Ste 20	09			
(City. State and Zip Code) s.j.carney@att.net E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) (Area Code) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees (S25 for Conversion S180.00 Filing Fees and Certified Copy Certified Copy, and		(Address)			
E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq	Bonita Springs, FL 34134				
E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Robert Kleinknecht, Esq	(City	, State and Zip Code)			
For further information concerning this matter, please call: Robert Kleinknecht, Esq. (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees (S25 for Conversion S155.00 Filing Fees and Certificate of and Certified Copy Certified Copy, and	s.j.carney@att.net				
Robert Kleinknecht, Esq. (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees S155.00 Filing Fees and Certificate of S180.00 Filing Fees and Certified Copy. Certified Copy, and	E-mail Address: (to be us	sed for future annual rep	port notifications)		
(Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) S150.00 Filing Fees S155.00 Filing Fees and Certified Copy S185.00 Filing Fees, (\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and	For further information (concerning this mat	ter, please call:		
(Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) \$\Begin{align*} \text{S150.00 Filing Fees} & \Begin{align*} \$	Robert Kleinknecht, Esq.		at (²³⁹ ,	351-18	828
dollars and drawn on a bank located in the United States) S150.00 Filing Fees S155.00 Filing Fees S180.00 Filing Fees S185.00 Filing Fees, (\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and	(Name of Contact P	Person)	(Area Code)	(Dayı	time Telephone Number)
(\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and		•		ocess	ed by this office must be payable in US
of Organization)	(\$25 for Conversion an	nd Certificate of			Certified Copy, and
STREET ADDRESS: MAILING ADDRESS:	STREET ADDRESS:		MAILI	NG A	DDRESS:
· · · · · · · · · · · · · · · · · · ·	New Filing Section			•	
Division of Corporations Division of Corporations Division of Corporations	•	S			•
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314	Clifton Building 2661 Executive Center C	Circle			

Tallahassee, FL 32301

Articles of Conversion

For

"Other Business Entity"

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 filing of the Articles of Conversion is: Schiller Investments
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a General Partnership (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)
November 1, 1993
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:
Schiller Investments SF 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 13 day of March	20 <u>/</u> 9
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative: Heroital Printed Name: Stephanie J. Schiller	
Signature(s) on behalf of Other Business Entity: S	see below for required signature(s)
Signature: Stephenie Schiller	
Printed Name Observation Stephanie J. Schiller	Title: General Partner
Signature: Steplanie Schiller Printed Name 708 (rephanie: Stephanie J. Schiller Oocusigned by: Signature: Swearch Schiller	
Signature: Sweanch Octuller Printed Nanwardbriedbishs Friedrich Schiller	Title: General Partner
Signature:Printed Name:	Til
Trinted Name:	title:
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	77.1
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	~*
Signature of Chairman, Vice Chairman, Director, or O If Directors or Officers have not been selected, an Inco	
if threefors of Officers have not been selected, an inco	orporator must sign.
If Florida General Partnership or Limited Liability	Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability	Limited Partnership:
Signatures of ALL, General Partners.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Schiller Investments SF LI	C		
		ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addre The mailing address ar		e principal office of the Limited Liability Comp	any is:
Principal Office Add	ress:	Mailing Address:	
3301 Bonita Beach Rd Ste	209	3301 Bonita Beach Rd Ste 209	
Bonita Springs, FL 34134		Bonita Springs, FL 34134	
<u>Ste</u>	phanie J. Schiller N DI Bonita Beach Rd Ste 20	he registered agent are: ame 99 P.O. Box NOT acceptable)	
330 F	phanie J. Schiller N DI Bonita Beach Rd Ste 20 lorida street address (nita Springs	P.O. Box <u>NOT</u> acceptable) FL 34134	
330 F	phanie J. Schiller N DI Bonita Beach Rd Ste 20 lorida street address (ame 99 P.O. Box <u>NOT</u> acceptable)	

(CONTINUED)

ARTICLE IV-

Stephanie J. Schiller

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

"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Stephanie J. Schiller
	3301 Bonita Beach Rd Ste 209
	Bonita Springs, FL 34134
MGR	Friedrich Schiller
···	3301 Bonita Beach Rd Ste 209
	Bonita Springs, FL 34134
(Use attachment if necessary)	
(Ose attachment if necessary)	
LE V: Other provisions, if any.	
	-
REQUIRED SIGNATURE:	
DocuSigned by:	
Stephenia Schiller	
Signature of a member or	an authorized representative of a member
inguature or a member of	with section 605,0203 (1) (b), Florida Statutes, I

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)