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(Cit	y/State/Zip/Phone	· #)
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	Certificates	of Status
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Special Instructions to	Hilling Officer:	
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Office Use Only

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COVER LETTER

TO:	New Filing S				
	Division of C	orporations.			
SUBJ	ECT: ALBAN	O REALTY, LLC			
		(Name of Re	sulting Florida Limit	ed Cor	npany)
The e Busin	nclosed Article ess Entity" into	es of Conversion, Artic o a "Florida Limited L	les of Organization iability Company	on, an " in a	nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	ereturn all corr	espondence concernin	g this matter to:		
ROMA	AN ALBANO	·····			
		(Contact Person)			
CONT	RACTORS REPO	DRTING SERVICE INC			
		(Firm/Company)			
13795	N NEBRASKA A				
		(Address)			
TAME	A, FL 33613				
		City, State and Zip Code)			
INFO(DACTIVATEMY	LICENSE.COM			
		be used for future annual re	port notifications)		
For fu	rther informati	on concerning this ma	tter, please call:		
ROM/	AN ALBANO		_ \) <u>932-5</u>	
	(Name of Conta	act Person)	(Area Code)	(Day	(time Telephone Number)
		for the following amou a bank located in the		rocess	sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles mization)	☐\$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
STRE	ET ADDRES	S:	MAILI	NG A	ADDRESS:
	Filing Section		New Fil	_	
	on of Corporat	ions			Corporations
	n Building Executive Cent	er Circle	P. O. Bo Tallahas		27 FL 32314
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Tallahassee, FL 32301

## For "Other Business Entity" Jinto

#### 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.

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>FLORIDA CORPORATION</u> PIG-2018 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of <u>FLORIDA</u>
(Enter state, or if a non-U.S. entity, the name of the country)
On <u>03/01/2016</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ALBANO REALTY, 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 Emity" 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 20TH day of APRIL	20 2019		
Signature of Authorized Representative of Lim	ited Liabitay Company:		
Signature of Authorized Representative: Printed Name: JOY ALBANO	Jule: AMBR	ua.	
Signature(s) on behalf of Other Posicess Entity:	[See below for required signature(s)]		
Signature: Printed Name: JOY AL XAM	Title: AMBR	<b>-</b> -	
Signature:Printed Name:			
Signature:Printed Name:	Title:	-	
Signature:Printed Name:	Title:	-	
Signature:		_	
irtinted Name:	I itle:	-	
Signature:Printed Name:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.			
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	***	19 APF
All others: Signature of an authorized person.			25
<u>Fees:</u>		21	50 is High
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	Kija.	09

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

he name of the L	me: imited Liability Company	is:	
ALBANO REALTY,	110		
		bdny Company "L.I.C.," or "LI.C.")	<del></del>
RTICLE H - Ac		principal office of the Limited Liability	Company is
rincipal Office A	Address:	Mailing Address:	
3795 N NEBRASKA	VAVE	13795 N NEBRASKA AVE	
AMPA, FL 33613  RTICLE III - R	egistered Agent, Registe	red Office, & Registered Agent's Signa	_ _ _ ture:
AMPA, FL 33613  RTICLE III - R The Limited Liability Cousiness entity with an income and	egistered Agent, Registe ompany cannot serve as its own R active Florida (egistration.) Florida street address of the	red Office, & Registered Agent's Signa egistered Agent. You must designate an individual or at	ture:
AMPA, FL 33613  RTICLE III - R The Limited Liability Consiness entity with an income of the construction o	ompany cannot serve as its own R active Florida (egistration.)	red Office, & Registered Agent's Signa egistered Agent. You must designate an individual or at the registered agent are:	ture:
AMPA, FL 33613  RTICLE III - R The Limited Liability Consiness entity with an income of the construction o	ompany cannot serve as its own Ractive Florida registration.) Florida street address of the CONTRACTORS REPORT.	red Office, & Registered Agent's Signa egistered Agent. You must designate an individual or at the registered agent are:	ture:
AMPA, FL 33613  RTICLE III - R The Limited Liability Consiness entity with an income of the construction o	ompany cannot serve as its own Ractive Florida registration.) Florida street address of the CONTRACTORS REPORT.	red Office, & Registered Agent's Signa egistered Agent. You must designate an individual or at the registered agent are:  NG SERIVCE INC	ture:
AMPA, FL 33613  ARTICLE III - R The Limited Liability Consiness entity with an income and income an	ompany cannot serve as its own Ractive Florida registration.)  Florida street address of the CONTRACTORS REPORT.  N. 13795 N NEBRASKA AVE	red Office, & Registered Agent's Signa egistered Agent. You must designate an individual or at the registered agent are:  NG SERIVCE INC	ture:
AMPA, FL 33613  RTICLE III - R The Limited Liability Consiness entity with an income of the construction o	ompany cannot serve as its own Ractive Florida registration.)  Florida street address of the CONTRACTORS REPORT.  N. 13795 N NEBRASKA AVE	red Office, & Registered Agent's Signa egistered Agent. You must designate an individual or at the registered agent are:  NG SERIVCE INC	ture:

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)

### ARTICLE IV-

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		
AMBR	JOY ALBANO	
	13795 N NEBRASKA AVE	
	TAMPA, FL 33613	
	<u></u>	
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	<u> </u>	
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(Use attachment if necessary)		
(Ose attachment if necessary)		
RTICLE V: Other provisions, if any.	1,,	
REQUIRED SIGNATURE:	2A/	
Signature of a member of	an authorized representative of a receive with section 605.0203 (1) (b). Florida Statut	nember
any false information submitted in a doc as provided for in s.817.155, F.S.	ument to the Department of State constitutes a	third degree felony
JOY ALBANO - AMBR		( - ) · · · =
	yped or printed name of signee	
•	Filing Fees	25
\$125.00 Filing For for Articles	of Organization and Designation of	Domintored Con-
\$ 30.00 Certified Copy (Option		
5 50.00 Certified Copy (Optio)	nal) S 5.00 Certificate of St	atus (Optional)
		97 B