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





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Regina Rabitaille, Esq.
Direct Line: 407.839.4209
Direct Facsimile: 407.650.0906
rrabitaille@broadandcassel.com

ATTORNEYS AND COURSELORS AT LAW

Bank of America Center 390 North Orange Avenue | Suite 1400 Orlando, FL 32801 T: 407.839.4200 F: 407.425.8377

nelsonmullins com
Tiller i till entre in New York of the Greater

May 28, 2019

#### <u>VIA CERTIFIED MAIL</u> PERSONAL AND CONFIDENTIAL

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Arturo Barcellona Custom Homes, LLC

Dear Sir/Madam:

I hope this letter finds you well. Enclosed please find the firm's check for \$150.00 to file the form for Articles of Conversion for Other Business Entity into Florida Limited Liability Company.

I am also enclosing an additional copy of this letter and ask that your office acknowledge receipt of this letter by appropriately stamping the enclosed copy and returning it to me in the self-addressed stamped envelope provided herein.

Should you have any questions, please do not hesitate to contact our office.

Sincerely.

NELSON MULLINS BROAD AND CASSEL

Kegya Ralitaille Regina Rabitaille, Esq.

Partner

RR/cp Enclosures

CC: Mr. Aaron M. Barcellona

### COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Arturo Barceliona Custom I	omes, FLC	
(Nan)	or Resulting Florida Himited Company)	
	Articles of Organization, and fees are submitted to convert arted Liability Company" in accordance with s. 605,1045, F.S.	r "Other
Please return all correspondence cor	rerning this matter to:	
Regina Rabitaille, Esq.		
(Contact Person		
Nelson Mullins Broad and Cassel		
(Firm-Compan		
390 N. Orange Ave., Ste. 1400		
(Address)		
Orlando, Florida 32801		
(City, State and Zip	lode)	
regina. $\pi$ abitaille $\hat{q}_j$ nelsonmullins.com		
E-mail Address: (to be used for future a	nual report notifications)	
For further information concerning t	is matter, please call:	
Regina Rabitaille, lisq.	at ( 407 ) 839-4209	
(Name of Contact Person)	(Area Code) (Daytime Lelephone Number)	
Enclosed is a check for the followin dollars and drawn on a bank located	amount: (All checks processed by this office must be payable n the United States)	in US
■ \$150,00 Filing Fees \$25 for Conversion & \$125 for Articles of Organization) ■ \$155,00 Filing and Certificate of Status		
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301	MAHLING ADDRESS: New Filing Section Division of Corporations P. Q. Box 6327 Tallahassee, Ft. 32314	

INHS11 (7:17)

# 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 \$.605.1045, Florida Statutes.

Statutes.	,
1. The name of the "Other Business Entity" immediatel ARTURO BARCULLONA CUSTOM HOMES, INC.	y prior to the filing of the Articles of Conversion is:
Chater Name of Other Busine	ss Entity (
2. The "Other Business Entity" is a Corporation	P05000118921
(Enter entity type: Example: corporation, limited pl	rtnership, general parinership, common law or business trust, etc.
First organized, formed or incorporated under the laws o	1 krida f
,	finter state, or if a non-U.S, entity, the name of the country)
8/25/2005 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:
Arturo Barcellona Custom Homes, I I C	
(Enter Name of Florida Limited Liabi	ity Company (
4. If not effective on the date of filing, enter the effective	e date:
(The effective date: Cannot be prior to date of receipt	
the date this document is filed by the Florida Depart	
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been approved in accordan	nce with all applicable statutes.
<ol> <li>The "Converted or Other Business Entity" has agreed to which such members are entitled under ss. 605,1006 and</li> </ol>	pay any members having appraisal rights the amount to 4 605,1061-605,1072, F.S.

Signature of Authorized Representative of Limited Liability Company:  Signature of Authorized Representative:  Printed Name: Aaron M. Barcellona  Signatures on behalf of Other Business Entity: [See below for required signature(s)]  Signature:  Printed Name: Aaron M. Barcellona  Title: President  Signature:  Printed Name: Title:  If Florida Corporation:  Signature of Chairman, Vice Chairman, Director, or Officer.  If Directors or Officers have not been selected, an Incorporator must sign.  If Florida General Partnership or Limited Liability Partnership:  Signature of one General Partners.  If Florida Limited Partnership or Limited Liability Limited Partnership:  Signatures of ALL, General Partners.  All others:  Signature of an authorized person.  Fees:  Articles of Conversion: \$25.00  Fees for Florida Articles of Organization: \$125.00	Signed t	hisday of	
Signature: Printed Name: Aural M. Barcellona Title: President  Signature: Printed Name: Title: President  Signature: Printed Name: Title:  Signature: Printed Name: Title:  Signature: Printed Name: Title:  If Florida Corporation: Signature of Chairman. Vice Chairman. Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.  If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners.  If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL, General Partners.  All others: Signature of an authorized person. Fees:  Articles of Conversion: \$25,00			
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Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]  Signature: Primed Name: Title: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title:  Signature: Printed Name: Title:  Signature: Printed Name: Title:  If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.  If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners.  All others: Signature of an authorized person.  Fees:  Articles of Conversion: \$25,00	orginatui Printed N	Name: Aaron M. Barcellona	Title: Manager
Signature: Printed Name: Title: Printed Name: Title: Signature: Printed Name: Title:  If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.  If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners.  If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.  All others: Signature of an authorized person. Fees:  Articles of Conversion: \$25.00			
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Signature of an authorized person.  Fees:  Articles of Conversion: \$25.00	All othe	ere:	
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Certified Copy: \$30.00 (Optional)		<del>-</del>	
Certificate of Status: \$5.00 (Optional)			• • • • • • • • • • • • • • • • • • •

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:	
Arturo Barcellona Custom Homes, LLC (Alust contain the words "Limited Liab	fity Company, "L.L.C.," or "L1 C.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
6526 Old Brick Road Suite 120-261	6526 Old Brick Road Saite 120-261	<del></del>
Windermere, Florida 34786	Windermere, Florida 34786	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registrations entity with an active Florida registration.)	ed Office, & Registered Agent's Signatered Agent, You must designate an individual	gnature: or another
The name and the Florida street address of the	registered agent are:	
Auron M. Barcellona Nar		in the second
6526 Old Brick Road. Suite 12		
	O. Box <u>NOT</u> acceptable)	<u> </u>
Windermere	FL 34786	<u></u>
City	Zip	
Having been named as registered agent and		

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. Thereby 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.,

Register (Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and A <u>ddre</u> ss:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Agron M. Barcellona
	6\$26 Old Brick Road, Suite 120-61
	Windermere, Florida 34786
(Use attachment if necessary)	
LE V: Other provisions, it any.	
DEADIOED CICNATURES	
REQUIRED SIGNATURES	
/1/2-	
Signatural Colonia	an authorized appropriation of a member
This document is executed in secondaries	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware (
any false information submitted in a docu-	ment to the Department of State constitutes a third degree fel
as provided for in s.817,155, F.S.	
Aaron M. Barcellona	
	ped or printed name of signee
ነገር -	'Pho'(! (\P !\T!  )  :\"   \T   :\"   \T   :\" \"  :\"