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# \* COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PRIVATE LOAN SERVICES, LLC
(Name of Resulting Florida Limited Company)

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:

Albert E. Rode, Sr
(Contact Person)
Private Loan Services LLC
(Firm/Company)
5543 Sir Churchill Drive
(Address)
Leesburg FL 34748  (City. State and Zip Code)
→(City, State and Zip Code)
a Irobe @ robearm strong. net E-mail Address: (to be used for future annual report notifications)
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Albert E. Rode Jan (410) 925-2412

(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)

☐ \$150.00 Filing Fees
(\$25 for Conversion & \$125 for Articles of Organization)

☐ \$150.00 Filing Fees and Certified Copy

☐ \$180.00 Filing Fees and Certified Copy

☐ \$185.00 Filing Fees and Certified Copy

☐ \$185.00 Filing Fees Certified Copy and Certified Copy and Certificate of Status

#### STREET ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassec, FL 32301

#### MAILING ADDRESS:

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

## 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:  PRIVATE LOAN SERVICES LLC  (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>limited liability company</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et
First organized, formed or incorporated under the laws of Maryland (Enter state, or if a non-U.S. entity, the name of the country)
on Jone 22, 2010 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
PRIVATE LOAN SERVICES LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 50 ne 1, 2019.
(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.)
<u>Note:</u> 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.

19 JUH 26 PH 3: 57

Signed this $23$ day of $M_2$	20 19
Signature of Authorized Representat	ive of Limited Liability Company:
Signature of Authorized Representative Printed Name: <u>At Bert E. Rode,</u>	Title: Managing Member
Signature(s) on behalf/of Other Busine	ss Entiry: [See below for required signature(s)]
Signature: Printed Name: Albert E. Roof	Trille: Managing Member
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
	Title:
	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman. Vice Chairman. If Directors or Officers have not been se	
If Florida General Partnership or Lin Signature of one General Partner.	nited Liability Partnership:
If Florida Limited Partnership or Lim Signatures of <u>ALL</u> General Partners.	nited Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	<u>:</u>
Articles of Conversion: Fees for Florida Articles of Org	2 \$25.00 Equipment = \$25.00 = \$25.00

\$30.00 (Optional) ~ \$5.00 (Optional)

Certified Copy: Certificate of Status: TANASSED FROM STATE

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

PRIVATE LOAN SERVICES LLC
(Must contain the words "Limited Liability Company, "Life Co." or "LLC.")

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

	Princi	pal C	)ffice	Add	ress:
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843 S.r Churchill Drive. 5543 Sir Churchill Drive.

eesburg, FL 34748

Leesburg, FL 34748

#### Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are: 151

Albert E. Rode, Ir 5543 Sir Church: 11 Drive
Florida street address (P.O. Box NOT acceptable) Leesburg FL 34748

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  $\ell$ 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>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Albert E. Rode Jr
	Albert E. Rode, Jr 5543 S.r Churchill Drive Leesburg, FL 34748
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATIBRE:	
REQUIRED SIGNATI-RE:	5/23/201
REQUIRED SIGNATURE:  Signature of a member of	or an authorized representative of a member
Signature of a member of This document is executed in accordar any false information submitted in a do	
Signature of a member of This document is executed in accordar any false information submitted in a do as provided for in s.817.155, F.S.	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes, I am awar cument to the Department of State constitutes a third degree
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Signature of a member of this document is executed in accordar any false information submitted in a document of the submitte	or an authorized representative of a member nee with section 605.0203 (1) (b). Florida Statutes. I am awar cument to the Department of State constitutes a third degree of the Department of State constitutes a t