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(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
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PICK-UP	☐ WAIT	MAIL
	usiness Entity Nar	ne)
(Do	ocument Number)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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IALLAHASSEE, FLORIDA

SEP 2 5 2019

K Brumbley

COVER LETTER

TO: New Filing Se Division of Co	ction for porations	*	•
SUBJECT:	Milliams CC (Name of Resu	ひ <u>Real Estate</u> Iting Florida Limited Comp	Grosp LLC
The enclosed Articles Business Entity" into	of Conversion, Article a "Florida Limited Lia	es of Organization, and bility Company" in ac	l fees are submitted to convert a cordance with s. 605,1045, F.S.
Please return all corre	spondence concerning	this matter to:	
Dar	(Contact Person)		
Williams	(O. Real Est. (Firm/Company)	ate Gosp	
219 Silvergla	(Address)		
	prings FL 32 (ity, State and Zip Code)		
Dary @ Will	ity, State and Zip Code) - amsand core q/- e used for future annual rep	estate com	
	on concerning this mat		
(Name of Conta	ct Person)	_at (<u>907</u>) 35 (Area Code) (Day	time Telephone Number)
Enclosed is a check f dollars and drawn on	or the following amou a bank located in the	nt: (All checks process United States)	sed by this office must be payab
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
			_

STREET ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, 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 follow **Other Business Entity** into a Florida Limited Liability Company in accordance with s.605.104 Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Converged For the Crosp Inc. (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Corporation</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or busin
First organized, formed or incorporated under the laws of
on $\frac{\sqrt{0/1/3c_16}}{\text{(date of organization, formation or incorporation)}}$.
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Org
(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 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 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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signature of Authorized Rep	recontative of Limite	azt Liahi	lity Company:
Signature of Authorized Rep	resentative of Limit	EU LIADI	int Company.
Signature of Authorized Repre	sentative:		
Signature of Authorized Repre Printed Name: Dary	Williams	Title: _	President
Signature(s) on behalf of Othe	er Busines <u>s Entity:</u> [S	See belov	v for required signature(s
Signature: // Car // W			
Printed Name: <u>Varyl</u> W	Many	_ Title: _	tresident
Signature:Printed Name:			
Printed Name:		_ 1 itle: _	
Signature:		TT'AL	
Printed Name:		_ i itte: _	
Signature:Printed Name:		777.1	
Printed Name:		_ litte: _	
Signature:		m' i	
Printed Name:		_ 1 itie: _	
Signature:			
Printed Name:		_ little: _	
If Florida Corporation: Signature of Chairman. Vice C If Directors or Officers have no	hairman, Director, or (ot been selected, an Inc	Officer. corporato	or must sign.
If Florida General Partnersh Signature of one General Partn	ip or Limited Liabili er.	ty Partne	ership:
If Florida Limited Partnersh Signatures of <u>ALL</u> General Pa	<u>ip or Limited Liabili</u> rtners.	ty Limite	ed Partnership:
All others: Signature of an authorized per	son.		
Fees:			
Articles of Conversio	n'	\$25.00)
Fees for Florida Artic		\$125.0	
Certified Copy:	105 Or O'Eminadion		O (Optional)
Certificate of Status:			(Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMF

ARTICLE I - Name:

The name of the Limited Liability Company is:

Willia	ims è Co Real Es	tate Group, LL	<u>. </u>
(Mu	st contain the words "Limited Liabil	ty Company, "L.L.C.," or "LLC."	")
ARTICLE II - Ad The mailing addres	dress: s and street address of the p	rincipal office of the Lim	ited Liability Com
Principal Office A	ddress:	Mailing Address:	
Altamonte	Lin Ln Springs, FL. 32714	219 S.luerglen Altamente St	In Dany H 3
(The Limited Liability Cobusiness entity with an	egistered Agent, Register of company cannot serve as its own Regulactive Florida registration.) Florida street address of the	istered Agent. You must designate	Agent's Signatur an individual or anoth
	Dayl E.	Williams	_
	Nar	ne	
	219 Silverglen	Ln.	_
	Florida street address (P.	O. Box NOT acceptable)	
	Altamente Sprir	195 FL 32714	
	City	Zip	_
liability comp registered agent	med as registered agent and pany at the place designated and agree to act in this cap g to the proper and-complet	in this certificate, I hereby acity. I further agree to co	naccept the appoint of the policy with the policy with the policy of the

(CONTINUED)

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapte

ARTI	ICLE	IV-
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The name and address of each person authorized to manage and control the Limited L Company:

Daryl Williams 319 Silversien Ln Altamonie Springs, FL 32
an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am avnent to the Department of State constitutes a third degr
ped or printed name of signee
ped or printed name of signee Filing Fees
֡

\$125.00 Filing Fee for Articles of Organization and Designation of Registers
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Op