11900249337

(Re	questor's Name)	
(Ad	dress)	
- (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,		

Office Use Only

N. SAMS 0CT 1 6 2019



000334940220

10/02/19--01003--011 **150.00



COVER LETTER

TO:	New Filing S					er, - th	
	Division of C	•				ŷ.	
SUB.	JECT: Skobel H	omes LLC					
		(Name of Res	sulting F	Florida Limite	d Con	npany)	
						nd fees are submitted to convert coordance with s. 605.1045, F.	
Pleas	e return all corr	espondence concernin	g this i	matter to:			
Micha	nel Skobel, Esq.						
		(Contact Person)					
Skobo	el Law PA						
		(Firm/Company)					
7475	SW 70th Ln						
		(Address)					
Gaine	sville, FL 32608						
	(1	City, State and Zip Code)					
micha	el@skobel.com						
E-i	mail Address: (to b	e used for future annual re	port not	ifications)			
For fi	urther informati	on concerning this ma	tter, pl	ease call:			
Micha	iel Skobel, Esq.		at (³	352	224-3	3692	
	(Name of Conta	nct Person)	,	(Area Code)	(Day	otime Telephone Number)	
		for the following amou a bank located in the		-	ocess	sed by this office must be payal	ble in US
(\$25 f) & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status		80,00 Filing f Certified Copy		☐\$185.00 Filing Fees. Certified Copy. and Certificate of Status	
STR	EET ADDRES	S:		MAILI	NG A	ADDRESS:	
	Filing Section			New Fil	_		
Divis	ion of Corporat	ions		Division	r of C	'ornorations	

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

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 s.605.1045. Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Skobel Development, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Florida Profit Corporation (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
First organized, formed or incorporated under the laws of
10/05/2006 OB
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Skobel Homes 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

- 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	28 day of September	_ 20_19	
Signature o	f Authorized Representative of Limit	ted Liability Company:	
Signature of Printed Nam	Authorized Representative: Authorized Representative:	Title: Authorized Member	_
<u>Signature(s</u>	on behalf of Other Business Entity:	See below for required signature(s)	
Signature: _ Printed Nam	e: Alex Skobel	Title: Director, President	_ _
			_
Printed Nam	ie:	Title:	- -
Signature: _	ne:		_
Signature: _	ne:	Tide	_
Printed Nam		title.	_
Signature: _ Printed Nam	ne:	Title:	- 26 - 541 - 541
C:			190 100 100 100 100 100 100 100 100 100
Printed Nam	ne:		DCT -
If Florida C	ne:		2 P
Signature of	Chairman, Vice Chairman, Director, or	Officer.	ت الله الله الله الله الله الله الله الل
II Directors	or Officers have not been selected, an inc	corporator must sign.	:42
	General Partnership or Limited Liabili Cone General Partner.	ty Partnership:	
	<mark>Limited Partnership or Limited Liabili</mark> of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of	f an authorized person.		
Fees:			
Fee: Cert	cles of Conversion: s for Florida Articles of Organization: tified Copy: tificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Skobel Homes LLC	· •			
(M	ust contain the words "Lin	nited Liability Co	mpany, "L.L.C" or "LLC.)
ARTICLE II - A				
The mailing addre	ess and street address	s of the princ	pal office of the Lin	nited Liability Company is
Principal Office	Address:	<u>N</u>	lailing Address:	
7475 SW 70th Ln			475 SW 70th Ln	
Gainesville, FL 3260	8		Gainesville, FL 32608	
				
(The Limited Liability C business entity with an	Company cannot serve as in active Florida registration Florida street addre	ts own Registered 1.) Pess of the regi 1., Skobel Law F		e an individual or another SLCKETAL AHASS
		Name		
	6404 SW 77th Dr.			_ 第 至 []
	Florida street add	dress (P.O. B	ox <u>NOT</u> acceptable)	3: 4 2
	Gainesville		FL 32608	· N
	Cit	ly	Zip	

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)

Having been named as registered agent and to accept service of process for the above stated limited

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Skobel, Alex
	7475 SW 70th Ln.
	Gainesville, FL 32608
4. \$ 2ay	
	2019 OC SECRE "ALI AH
	<u> </u>
	> = = = = = = = = = = = = = = = = = = =
(Use attachment if necessary)	
(Osc attachment if necessary)	P# 3: 42

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.

Alex Skobel

 \mathbf{A}

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)