L19000267953

(Re	equestor's Name)	
(Ad	idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

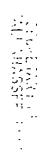
Office Use Only

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COVER LETTER

TO:	New Filing S Division of C				
SUR	JECT: SIGNAT	URE TITLE. LLC			
.,,,,,,,		(Name of Res	ulting Florida Limite	ed Con	npany)
					d fees are submitted to convert an "Othe coordance with s. 605.1045, F.S.
Pleas	se return all corr	espondence concernin	g this matter to:		
Ower	ı E. Harris				
		(Contact Person)			
		(Firm/Company)			
	_	(Address)			
6402	Spyglass Lane, Bra	adenton, FL 34202			
		City, State and Zip Code)			
	@signaturetitleco.c				
E-	mail Address: (to b	e used for future annual re	port notifications)		
For f	urther informati	on concerning this ma	tter, please call:		
Ower	E Harris		_at (713-4	089
	(Name of Conta	ict Person)	(Area Code)	(Day	time Telephone Number)
		or the following amou a bank located in the		rocess	sed by this office must be payable in US
(\$25 f & \$12	50.00 Filing Fees for Conversion 5 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New Divis Clifto	EET ADDRES Filing Section sion of Corporat on Building	ions	New Fil Division P. O. Bo	ling S n of C ox 631	orporations 27
200 l	Executive Cent	er Circle	Lallahas	ssee, l	FL 32314

Tallahassee, FL 32301

Articles of Conversion For

"Other Business Entity" Into

Florida Limited Liability Company

FILED

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SECREMANY OF STATE

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: SIGNATURE TITLE COMPANY
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a 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
(Enter state, or if a non-U.S. entity, the name of the country)
9/19/1985 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: SIGNATURE TITLE, 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 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 t	his 164 day of October	20_19	
	re of Authorized Representative of Limi	ted Liability Company:	
Signatur	e of Authorized Representative: <u>(2007)</u>	(E + Mun	
Printed N	Name: Owen E Harris	Title: Member Manager	-
Signatui	re(s) on-behalf of Other Business Entity: [See below for required signature(s)]	
	e: Will E Lauri Name: Owen E. Harris		
Signatur	E Halin		-
Printed N	Name: Owen E. Harris	Title: President	-
Signature	e:	<u> </u>	
Printed N	e: Name:	_ Title:	-
Cimaria			
Drinted N	e:	Title:	-
Signature	e:		_
Printed N	Name:	Title:	-
Sionatur	o·		
Printed N	e: Name:	_ Title:	-
Signatur	e: Name:	an d	>. ~
Printed N	Name:	Title:	019
If Florid	a Corporation:		F1L 2019 OCT 22 ATT AHASSE
	e of Chairman, Vice Chairman, Director, or G		12 SSS.
If Direct	ors or Officers have not been selected, an Inc	corporator must sign.	1 -
If Florid	a General Partnership or Limited Liabilit	ty Partnership	呈回
Signature	e of one General Partner.	ty rattactsmy.	<u>.</u>
-			3: 48
	a Limited Partnership or Limited Liabilit	y Limited Partnership:	
Signatur	es of <u>ALL</u> General Partners.		
All other	rs:		
	of an authorized person.		
Fees:			
£ ⁴	Articles of Conversion:	\$25.00	
	Fees for Florida Articles of Organization:	\$125.00	
	Certified Copy:	\$30.00 (Optional)	
	Certificate of Status:	\$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
SIGNATURE TITLE, LLC		
(Must contain the words "Lin	nited Liability Company, "L.L.C.," or "LI,C,")	
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
6402 Spyglass Lane	6402 Spyglass Lane	
Bradenton, FL 34202	Bradenton, FL 34202	

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:

Owen E Harris		2019 31 31 31 31 31 31 31 31
	Name	1900
6402 Spyglass Lane		17 22 17 22 18 85
Florida street address	s (P.O. Box <u>NOT</u> acceptable)	-
Bradenton	FL 34202	PH 3
City	Zip	34.48

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, 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:

Title:	Name and Address:	
/'AMBR" = Authorized Member		
"MGR" = Manager AMBR	Owen E Harris	AMBR
ASIDK	6402 Spyglass Lane	TIME
	Bradenton, FL 34202	
		
		*'
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(Use attachment if necessary)		22 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
•		.
CLE V: Other provisions, if any.		<u>ن</u> <u>-</u>
		
REQUIRED SIGNATURE:	Í	
wh	E Haun	
Signature of a member or a	n authorized representative of	a member
This document is executed in accordance vany false information submitted in a docume as provided for in s.817.155, F.S.	vith section 605.0203 (1) (b). Florida St ent to the Department of State constitut •	atutes. I am aware that es a third degree felony
OWEN L	E HAKRIS ed or printed name of signee	
Тур		
	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)