# L19000 280524

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

Office Use Only



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T 239.642.1485 F 239.642.1487 E info@patrickneale.com www.patrickneale.com

P.O. Box 9440 Naples, Florida 34101-9440



Naples: 5470 Bryson Court Suite 103 Naples, Florida 34 109

Marca Island (by appointment): 950 North Collier Blvd, Suite 400 Marco Island, Florida 34145

November 8, 2019

State of Florida, Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

> Re: Articles of Conversion/Articles of Organization Hill Fine Art Consulting Inc converting to Hill Fine Art Consulting LLC

#### Gentlemen:

Enclosed here with please find our formal Cover Letter. Articles of Conversion and Articles of Organization with regard to the above entity. Also please find enclosed our check in the amount of \$155.00 representing the Filing Fee and Certificate of Status.

Kindly process this conversion, returning Certificate of Status to the undersigned. Should you require any additional information or documentation, please advise.

Very truly yours.

PHN:im

Enclosures

Cc: Client

### **COVER LETTER**

TO: New Filing S Division of C					
	Hill Fine Art Consulti	ng LLC			
		ulting Florida Limite	d Con	npany)	
				d fees are submitted to convectordance with s. 605.1045.	
Please return all corr	espondence concernin	g this matter to:			
Patrick H. Neale					
	(Contact Person)				
Patrick Neale & Associa	tes				
	(Firm/Company)				
5470 Bryson Court, Suit	e 103				
	(Address)				
Naples, FL 34104					
((	City, State and Zip Code)				
email-service@patrickne	rale.com				
E-mail Address: (to b	e used for future annual re	port notifications)			
For further informati	on concerning this ma	tter, please call:			
Patrick Neale	-	_at ()	642-1	1485	
(Name of Conta	ict Person)	(Area Code)	(Day	time Telephone Number)	
dollars and drawn on	a bank located in the	United States)		sed by this office must be pay	cable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing 1 and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRES New Filing Section Division of Corporat Clifton Building		New Fil	ing S r of C	lorporations	JIVÄŠIEN 61.

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## **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.

	Inc.		·		
(Enter Name of C	Other Business En	tity)			
2. The "Other Business Entity" is a			0000 1503		
(Enter entity type. Example: corporation	on, limited partner.	ship, general p	artnership, common	law or business t	rust, etc.)
First organized, formed or incorporated under	the laws of	Florida		<u> </u>	
	(Enter	state, or if a n	on-U.S. entity, the n	ame of the count	y)
on January 28, 2005					
(date of organization, formation or incorporation)					
3. The name of the Florida Limited Liability	Campany as as	r Pende in de	vattaahad tutial	lar of Organia	ation
5. The name of the Florida fainted faithfly	Company as se	t totul in un	attached Artici	ies of Organiz	atton
Hill Fine Art Consulting LLC		·			
(Enter Name of Florida L	imited Liability C	ompany)			
4. If not effective on the date of filing, enter t	the effective da	te:	1/1/2020		
(The effective date: Cannot be prior to date	e of receipt or	filed date n	or more than 90	calendar day	s after
	c or receipt or	incu uate n		+	
the date this document is filed by the Florid	da Departmen	t of State.)			
the date this document is filed by the Florio Note: If the date inserted in this block does not meet t	<mark>da Departmen</mark> he applicable statt	t of State.)			
the date this document is filed by the Florid	<mark>da Departmen</mark> he applicable statt	t of State.)			
the date this document is filed by the Florio Note: If the date inserted in this block does not meet t	da Departmen he applicable statt s records.	t of State.) itory filing req	uirements, this date		
the date this document is filed by the Floric Note: If the date inserted in this block does not meet to document's effective date on the Department of State's 5. The plan of conversion has been approved	da Departmen he applicable state s records. in accordance v	t of State.) ntory filing required vith all appl	uirements, this date sicable statutes.	will not be listed	as the
the date this document is filed by the Florid Note: If the date inserted in this block does not meet to document's effective date on the Department of State's	da Departmen he applicable state s records. in accordance v as agreed to pay	t of State.) nory filing req vith all appl any member	uirements, this date vicable statutes.	will not be listed A rights the amo	as the
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Signed this/ day of	20_19
Signature of Authorized Representative of Limi	$1 = 1_{2} 1_{3}$
Signature of Authorized Representative:  Representative:  Representative:	one A-DEL
Printed Name: Barbara A. Hill	Title: Manager/Member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Bullous A Hill Printed Name: Barbara A. Hill	Title: President
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Hill Fine Art Consulting LLC	:	
(M	lust contain the words "Limited Liab		
ARTICLE II - A	ddress:		
		principal office of the Limited	Liability Company
Principal Office	Address:	Mailing Address:	
340 Madison Court		340 Madison Court	
Fort Myers Beach FL 33931		Fort Myers Beach FL	33931
ARTICLE III - F	Registered Agent, Register	ed Office, & Registered Agen	t's Signature:
ARTICLE III - F	Registered Agent, Register		t's Signature:
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Reg	ed Office, & Registered Agent gistered Agent. You must designate an ind	t's Signature: lividual or another
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Registration.)	ed Office, & Registered Agent gistered Agent. You must designate an ind	t's Signature: ividual or another
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Register ective Florida registration.)  Florida street address of the	ed Office, & Registered Agent gistered Agent. You must designate an ind e registered agent are:	t's Signature: ividual or another
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Registration.)  Florida street address of the Barbara A. Hill	ed Office, & Registered Agent gistered Agent. You must designate an ind e registered agent are:	t's Signature: lividual or another 13 HGV 12 PH
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Register active Florida registration.)  Florida street address of the Barbara A. Hill National Serve Se	ed Office, & Registered Agent gistered Agent. You must designate an ind e registered agent are:	t's Signature: ividual or another 13 HOV 12
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Register active Florida registration.)  Florida street address of the Barbara A. Hill National Serve Se	ed Office, & Registered Agent gistered Agent. You must designate an indee registered agent are:	t's Signature: ividual or another

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)

Λ	RT1	CI	F	$1V_{-}$
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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 MGR	Barbara A. Hill
	340 Madison Court
	Fort Myers Beach, FL 33931
(Use attachment if necessary)	
CLE V. Other annihing if and	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	. 1
<u> </u>	Una A 7/2 NO
/\)U	Weed to MAC
This document is executed in accord	er or an authorized representative of a member dance with section 605.0203 (1) (b), Florida Statutes. I am aware that document to the Department of State constitutes a third degree felon
Barb	ara A. Hill

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)