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(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:

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CTC 3 0 7019 K. Brumbley

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

12/27/2019

D	ate:	12/27/201	9	and SW
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Name:	STEEL C	CITY SETTLEME	ENT	
Document #:				
Order #:	1249421	9		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:				
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Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amou	int:\$ 180.00)	

Thank you!

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: STEEL CITY SETTLEMENT, LLC	
(Name of Resulting Florida Limi	ted Company)
The enclosed Articles of Conversion, Articles of Organizat Business Entity" into a "Florida Limited Liability Company	
Please return all correspondence concerning this matter to:	
Shaun Fleming	
(Contact Person)	-
Buchanan Ingersoil & Rooney PC	
(Firm/Company)	-
501 Grant St., Suite 200	
(Address)	-
Pittsburgh, PA 15210	
(City, State and Zip Code)	-
kcampbell@maronda.com	
E-mail Address: (to be used for future annual report notifications)	-
For further information concerning this matter, please call:	
Shaun Fleming at (412	562-1588
(Name of Contact Person) (Arca Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks publicates and drawn on a bank located in the United States)	processed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion and Certificate of Status of Organization) \$\sum{1}{1}\$	
	Street Address:
	New Filing Section
	Division of Corporations The Centre of Tallahassee
	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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: Steel City Settlement, Inc.
(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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
04/21/2008 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:
Steel City Settlement, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 12/31/2019 @ 11:59 p.m. (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
(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 this 27th	day of December	20 <u></u>	
Signature of Auth	orized Representative of Liq	nited Liability Company:	
Signature of Autho Printed Name: Rona	rized Representative:	Titie: Authorized Representative of Member	r
Signature(s) on be	half of Other Business Entity.	[See below for required signature(s)]	
Signature:		Condown of	
Printed Name: Rona	ld W. Wolf	Title: Director and President	
Signature:		/	
Printed Name:		Title:	
Signature:	<u> </u>	·	
Printed Name:		Title:	
Cionatura			
Printed Name:		Title:	
11.000011.000			
Signature:	<u> </u>		
Printed Name:		Title:	
Signature:		- Control of the cont	
Printed Name:		Title:	
	tion: an, Vice Chairman, Director, or ers have not been selected, an In		
If Florida General l	Partnership or Limited Liabil	ity Partnership:	
Signature of one Ger			
If Florida Limited I Signatures of ALL C	<u>Partnership or Limited Liabili</u> Feneral Pariners.	ity Limited Partnership:	
All others: Signature of an autho	orizėd person.		
Fees:			
Articles of C Fccs for Flor Certified Co Certificate or	rida Articles of Organization: py:	\$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 Li	ability Company is:		
(h funt	Steel contain the words "Limited	City Settlement, LLC	
(Must	contain the words "Limited	Liability Company,	E.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and str	cet address of the principal	office of the Limited	Liability Company is:
<u>Pri</u>	ncipal Office Address:		Mailing Address:
3999 West First	Street, Suite 2 (SR46)	3999	West First Street, Suite 2 (SR46)
Sanford, FL 12			ord, FL 32771
		Scott Howard Name 3999 West First Str	rect
	Florida street addres	s (P.O. Box NOT ac	
	Sanford	Florida	32771
	City	State	Zip
lace designated in this certific urther agree to comply with th	cate, I hereby accept the app te provisions of all statutes r e obligations of my position Goot Y By:	ointment as registered elating to the proper d	above stated limited liability company at it is agent and agree to act in this capacity. Indicomplete performance of my dutles, at provided for in Chapter 605, F.S

Title:	Name and Address:
"AMBR" = Authorized Member	**************************************
"MGR" = Manager	
AMBR	Marcada Homes, LLC of Florida
	3999 West First Street, Suite 2 (SR46)
	Sanford, FL 32771
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	· · · · · · · · · · · · · · · · · · ·
	
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ective date is listed, the date must be speci	f filing: 12/31/2019 @ 11:59 p.m. EST . (OPTIONAL) If c and cannot be more than five business days prior to or
EV: Effective date, if other than the date of ective date is listed, the date must be special filling.)	lfic and cannot be more than five business days prior to or et the applicable statutory filing requirements, this date will r
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