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Certified Copies	Certificates	s of Status
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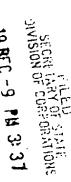
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## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Home Buyers of (Name of Resulting Florida	Tampa LLC Limited Company)
The enclosed Articles of Conversion, Articles of Organ Business Entity" into a "Florida Limited Liability Con	
Please return all correspondence concerning this matte	r to:
Milton Heather  (Contact Person)  Home Buyers of Tampa  (Firm/Company)	
235 Apollo Beach Blvd # 258 (Address)	
Apollo Beach, FL. 33572  (City, State and Zip Code)  milton. heather a home buyers of  E-mail Address: (to be used for future annual report notification)	
For further information concerning this matter, please	
Multon Heather at (817) (Name of Contact Person) (Area	3 ) 404 - 4066 Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All che dollars and drawn on a bank located in the United State	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of and Certificate of Status	
New Filing SectionNoDivision of CorporationsDClifton BuildingP.	AILING ADDRESS: ew Filing Section ivision of Corporations O. Box 6327 allahassee, FL 32314

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
Horne Buyers of Tampa LLC (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Lymited Liebil it (empany) (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Nevada M1500007727 (Enter state, or if a non-U.S. entity, the name of the country)
on 7-1-17, 2015 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Home Bulles of Tampa
Home Buckers of Tampa (Exter 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 this 3 day of December	20_19
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Mil- Printed Name: Milton Healther	Title: # Wanager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: 1164 en Heather  Printed Name: M. 1 to n Heather	Title: Manager
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If 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 Liabili Signatures of ALL 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

Home Buc	ecis of	Tombé	LLC	
(Must contain the	Jwords "Limited L	iability Company.	L.L.C." or "LLC.")	

### ARTICLE II - Address:

Principal Office Address:

ARTICLE I - Name.

The name of the Limited Liability Company is:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

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235 Apollo Brach Blud # 258 Apollo Brach FL 33572	235 Apoilo Brach Blud 258 Apollo Brach, Fl. 33572

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:

Milton Hearther

Name

Wisteria Unio

Florida street address (P.O. Box NOT acceptable)

Aprilo Beach FL 33572

City Zin

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)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGG	Milton teather
	Apollo Beach Fl. 33572
<u> MGC</u>	Kristy Hart 1301 Wisteria Laine
	Apollo Beach FL 33572
(Heaptuchment if necessary)	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	-A'
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:  M. H. W.	
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member e with section 605,0203 (1) (b). Florida Statutes, I am aware th
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document in a docum	
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605,0203 (1) (b). Florida Statutes, I am aware the ument to the Department of State constitutes a third degree feio
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605,0203 (1) (b). Florida Statutes, I am aware th

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-

Company: