L20000094518

(Red	uestor's Name)	
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doo	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	filing Officer:	

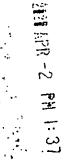


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March 17, 2020

JOHN P. BOSTON 725 HARBOUR DR. NAPLES, FL 34103

SUBJECT: HARBOUR SHOALS, LLC

Ref. Number: W20000027970

We have received your document for HARBOUR SHOALS, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by an authorized person.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 620A00005824

2020 AFR -2 AMII: 19

COVER LETTER

Division	ng Section of Corporations	'		
SUBJECT:	larbour Shoals, LLC			
50101.CT	(Name of Re	sulting Florida Limit	ed Con	npany)
The enclosed Art Business Entity"	icles of Conversion, Artic into a "Florida Limited L	les of Organizati iability Company	on, an " in a	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all	correspondence concernin	g this matter to:		
John P. Boston				
•	(Contact Person)			
Harbour Shoals, L	LC			
	(Firm/Company)			
725 Harbour Dr.				
	(Address)			
Naples, FL 34103	ı			
	(City, State and Zip Code)			
johnpboston.1964	@gmail.com			
E-mail Address:	(to be used for future annual re	port notifications)		
For further inform	nation concerning this ma	tter, please call:		
John P. Boston		_at (910-7	7179
(Name of C	ontact Person)	(Area Code)		time Telephone Number)
	ck for the following amount on a bank located in the		rocess	ed by this office must be payable in US
☐ \$150.00 Filing Fe \$25 for Conversion & \$125 for Articles of Organization)	es	□\$180.00 Filing and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing A		_		Address:
		New Filing Section Division of Corporations		
P.O. Box	•			entre of Tallahassee
Tallahasse	e, FL 32314			N. Monroe Street, Suite 810

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: Harbour Shoals, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liabiality 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)
October 3, 2018 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:
Harbour Shoals, 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 th	is <u>27</u> day o	of February	20_20
	•		ited Liability Company:
Signature Printed N	of Authorized Repame: John P. Bosto	presentative:	Title: President
Signature	e(s) on behalf of O	ther Business Entity:	[See below for required signature(s)]
₹ Signature:	John V. Om	X	
Printed N	ame; John P. Boston	1	Title:
Signature	:		
Printed N	ame:		Title:
Signature			
Printed Na	ame:		Title:
Printed Na	ame:		Title:
Signature: Printed No		·	Title:
i ilitea ivi			Title.
Signature:			
Printed Na	ıme:		Title:
Signature If Director If Florida	rs or Officers have r	Chairman, Director, or not been selected, an Ir hip or Limited Liabil	corporator must sign.
Signature	of one General Part	ner.	
If Florida Signatures	Limited Partners of ALL General Partners	hip or Limited Liabili artners.	tv Limited Partnership:
All others Signature	<u>:</u> of an authorized per	rson.	
Fees:			
Fe Ce	ticles of Conversion es for Florida Artic rtified Copy: rtificate of Status:	on: cles of Organization:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		N FOR FLORIDA	A LIMITED LIAD	DILITY COMPANY
ARTICLE I - Na The name of the I	ame: Limited Liability C	ompany is:		
Harbour Shoals, L	LC	_		
(2	lust contain the words "L	limited Liability Compan	c, "L.L.C.," or "LLC.")	
ARTICLE II - A The mailing addre		ess of the principal of	office of the Limited	d Liability Company is:
Principal Office	Address:	<u>Maili</u>	ng Address:	
725 Harbour Shoal Naples, FL 34103	<u> </u>		arbour Shoals	
Vapies, 12 04100		Napie	s, PL 34103	
The name and the	Florida street addr	ress of the registered	d agent are:	
		iName		
	725 Harbour Shoa	ils Idress (P.O. Box <u>N</u> o	OT accentable)	
	Naples		34103	
		FL '	Zip	
liability comp registered agent statutes relatin	pany at the place de and agree to act in ig to the proper and	esignated in this ceri othis capacity. I fur I complete performa	ificate, I hereby acc ther agree to comply nce of my duties, an	or the above stated limited sept the appointment as with the provisions of all d I am familiar with and r in Chapter 605, F.S
		gent's Signature (R (CONTINUED)	EQUIRED)	2R2 APR -2 PA

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager Manager	John Boston 725 Harbour Dr. Naples, FL 34103
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felony
John P. E	oston

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)