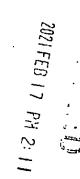
# L210000 70313

(Red	questor's Name)	
(Address)		
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(City	y/State/Zip/Phone	<del>e #)</del>
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	·

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# FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

2/17/2021

NAME:

FARM AND CITY REAL ESTATE INC.

TYPE OF FILING: CONVERSION

COST:

180.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE While Hodge

FIR Second X

### **COVER LETTER**

	New Filing S Division of C				
SUBJEC	CT. Farm & C	Country Real Estate LLC	;		
CODID	···		sulting Florida Limi	ted Cor	npany)
					nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please ro	eturn all corre	espondence concernin	g this matter to:		
Gabriel F	alco				
		(Contact Person)	-	•	
		(Firm/Company)		-	
PO Box 7	741	<del></del>		_	
		(Address)			
Loxahato	hee FL 33470			_	
	•	City, State and Zip Code)			
	alco@gmail.co				
E-mail	Address: (to b	e used for future annual re	port notifications)		
For furth	er information	on concerning this ma	tter, please call:		
Gabriel F	alco		_at (631-	307-6	6525
(	Name of Conta	ct Person)		(Day	rtime Telephone Number)
		or the following amou a bank located in the		roces	sed by this office must be payable in US
□ \$150.00 (\$25 for C & \$125 for of Organiz	r Articles	□\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
N D P	Aniling Addr New Filing Se Division of Co O. Box 632 Callahassee, F	ection orporations 7		New I Divisi The C 2415	t Address: Filing Section fon of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303

 $\mathcal{J}(\mathbf{x}) = (\mathbf{x}_{1}, \dots, \mathbf{y}_{n}) \in \mathbb{R}^{n}$ 

### **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.

l. Fa	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: rm and City Real Estate Inc
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a corporation formally a common law entity sole proprietership P20000050362
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fir	rst organized, formed or incorporated under the laws of Florida
	(Enter state, or if a non-U.S. entity, the name of the country)
on	November 6, 2019
OII	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Fa	rm and City Real Estate LLC
	(Enter Name of Florida Limited Liability Company)
4. (T	If not effective on the date of filing, enter the effective date:  he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
	e date this document is filed by the Florida Department of State.)
No	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the sument'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 16 day of Feb	20_2/			
Signature of Authorized Representative of Limited Liability Company:				
Signature of Authorized Representative:  Printed Name: Falco	Title: Pres und yes			
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]			
Signature: The fall Printed Name: Caboic Folky	Title: PCOS			
Signature: Printed Name:	Title:			
Signature: Printed Name:	Title:			
Signature:Printed Name:	Title:			
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.	Officer. corporator must sign.			
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.				
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

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Farm & City Real Estate LLC				
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LI.C.")			
ARTICLE II - Address:				
The mailing address and street address of the pri	ncipal office of the Limite	d Liability C	ompany	y is:
Principal Office Address:	Mailing Address:			
1666 C Road	PO Box 741			
Loxahatchee FL 33470	Loxahatchee FL 33470			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agered Agent. You must designate an	ent's Signatu individual or anot —	re: 2021	
The name and the Florida street address of the re	gistered agent are:	1	££8	
Gabriel Falco		· .	17	
Name			PH	1 5
1666 C Road		•	$\ddot{\omega}$	المتدالا
Florida street address (P.O.	Box NOT acceptable)	<u></u>		
Loxahatchee	FL 33470			
City	Zip			

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/MGR	Gabriel Falco
7 UNDIVINOIT	1666 C Road
	Loxahatchee FL 33470
	Localitatories i L 35470
AMBR/MGR	Devon Falco
	1666 C Road
	Loxahatchee FL 33470
<del></del>	
<del></del>	
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	a
	the second
Signature of a member or a	an authorized representative of a member
I his document is executed in accordance	with section 605 0203 (1) (b) Placida Continue I 1
any raise information submitted in a docum as provided for in s.817.155, F.S.	nent to the Department of State constitutes a third degree felony
as provided for in s.a 17.153, P.S.	, ~ /
(~ Abril)	talco
Typ	ped 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)