UZU000080050

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
ified Copies Certificates of Status
ecial Instructions to Filing Officer:
Office Use Only



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COVER LETTER

O: New Filing S Division of C					
HIRJECT, SILVER	LIGHT MORTGAGE, LL	0			
			g Florida Limite	ed Con	npany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
lease return all corr	espondence concerning	g thi	s matter to:		
PROCESSING DEPT.					
	(Contact Person)	•			
AYCORPORATION B	USINESS SERVICES, I	NC.			
	(Firm/Company)				
16025 MUREAU ROA	D SUITE 120				
	(Address)				
CALABASAS, CA 913					
	City, State and Zip Code)				
	MYCORPORATION e used for future annual re				
or further informati	on concerning this ma	ter.	please call:		
ROCESSING DEPAR	RTMENT	91 (, 877	, 692-6	5772
(Name of Conta	et Person)	_" ((Area Code)	/ (Day	time Telephone Number)
	or the following amou a bank located in the l			rocess	sed by this office must be payable in US
1 \$150.00 Filing Fees 25 for Conversion \$125 for Articles Organization)	☐\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Adda	ress:		9	Street	Address:
New Filing So			_		Filing Section
Division of C	•		1	Divisi	on of Corporations
P.O. Box 632	7		•	The C	entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

HS11 (7/17)

Tallahassee, FL 32314

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 SILVERLIGHT MORTGAGE, LLC	of Conve	ersion	is:
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a			
(Enter entity type. Example: corporation, limited partnership, general partnership, common	law or busi	ness tr	ust, etc.)
First organized, formed or incorporated under the laws of			
(Enter state, or if a non-U.S. entity, the n	ame of the	country	<i>i</i>)
01/26/2018 on			
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Article	les of Org	ganiza	tion:
SILVERLIGHT MORTGAGE, LLC			
(Enter Name of Florida Limited Liability Company)			
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 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 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 appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	l rights the		unt to
		2021 FI	
		FEB	!
		C)	
		\mathbb{R}	. •
	· • <u>:</u>	4: 35	4 ."

Signed this day of	20 <u>21</u> .
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	Title: Member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Muchel Jene Printed Name: MICHAEL JENNE	
Printed Name: MICHAEL JENNE	Title: Member
Signature:	
Printed Name:	Title:
Signature:	
'rinted Name:	Title:
lignature:	
lignature:	Title:
ignature:	
rinted Name:	Title:
ignature:	
ignature:rinted Name:	
Florida Corporation: ignature of Chairman, Vice Chairman, Director, or Directors or Officers have not been selected, an Inc.	
Florida General Partnership or Limited Liabili gnature of one General Partner.	ty Partnership:
Florida Limited Partnership or Limited Liabilise gnatures of ALL General Partners.	ty Limited Partnership:
l others: nature of an authorized person.	
es:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	SILVERLIGHT MO		
	(Must contain the words "Limited Lia	oility Company, "L.L.C.," or "LLC.")	
ARTICLE II -	Address:		
The mailing add	lress and street address of the	principal office of the Limited Liability Con	npany is
		Matthews A.3.3	
Principal Offic	e Address:	Mailing Address:	
2217 Hannah Wa	ay S		
Dunedin, FL 346	98		
The Limited Liabilit	- Registered Agent, Registe ty Company cannot serve as its own Re	red Office, & Registered Agent's Signature egistered Agent. You must designate an individual or another	
The Limited Liabilit business entity with	- Registered Agent, Registe ty Company cannot serve as its own Re an active Florida registration.)	egistered Agent. You must designate an individual or anothe	
The Limited Liabilit business entity with	- Registered Agent, Registe ty Company cannot serve as its own Re	egistered Agent. You must designate an individual or anothe	
The Limited Liabilit business entity with	- Registered Agent, Registe ty Company cannot serve as its own Re an active Florida registration.)	egistered Agent. You must designate an individual or anothe	
The Limited Liabilit business entity with	- Registered Agent, Registery Company cannot serve as its own Relan active Florida registration.) he Florida street address of the MICHAEL JENNE	egistered Agent. You must designate an individual or anothe	
The Limited Liabilit business entity with	- Registered Agent, Registery Company cannot serve as its own Related an active Florida registration.) the Florida street address of the MICHAEL JENNE No.	egistered Agent. You must designate an individual or another	
The Limited Liabilit business entity with	- Registered Agent, Registery Company cannot serve as its own Relan active Florida registration.) he Florida street address of the MICHAEL JENNE No. 2217 Hannah Way S	egistered Agent. You must designate an individual or another	
The Limited Liabilit business entity with	- Registered Agent, Registery Company cannot serve as its own Relan active Florida registration.) he Florida street address of the MICHAEL JENNE No. 2217 Hannah Way S	registered Agent. You must designate an individual or another are:	

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-

as provided for in s.817.155, F.S.

MICHAEL JENNE

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	MICHAEL JENNE
ANIDIX	2217 Hannah Way S
	Dunedin, FL 34698
	Daniedin, F. E. O-FOSO
	· · · · · · · · · · · · · · · · · · ·
	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
DECKUDED CICHATURE.	
REQUIRED SIGNATURE:	\
Mulul (fene

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)