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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	<u> </u>
·		•
PICK-UP	■ WAIT	MAIL
(D)	reinosa (Catiby Noma)	
(BL	isiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates or	f Status
Sanaial Instructions to	Filias Officer	
Special Instructions to	Filing Officer:	
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Office Use Only



800365298428

05/04/21--01053--019 **150.00

PH 2:

COVER LETTER

	New Filing S Division of C				
SUBJE	CCT: Five On	Hill Inc			
0019012		(Name of Res	sulting Florida L	imited Cor	npany)
			_		nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please 1	return all corr	espondence concernin	g this matter t	.0:	
Keith N	Alarcon				
		(Contact Person)			
Five On	Hill Inc				
		(Firm/Company)			
4195 Fo	orest Hill Drive				
		(Address)			
Cooper	City. FL 33026	3			
	(1	City, State and Zip Code)			
keithala	rcon@yahoo.c	om			
E-ma	iil Address: (to b	oe used for future annual re	port notification	s)	
For furt	ther informati	on concerning this ma	tter, please ca	II:	
Keith Al	arcon		_at (770-	1384
	(Name of Conta	act Person)	ur ((Area Co	ode) (Day	ytime Telephone Number)
		for the following amou a bank located in the	•	•	sed by this office must be payable in US
(\$25 for	00 Filing Fees Conversion for Articles ization)	☐\$155,00 Filing Fees and Certificate of Status	□\$180.00 Fi and Certified	-	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee	ection Corporations 17		New I Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303



July 12, 2021

KEITH N ALARCON 4195 FOREST HILL DR COOPER CITY, FL 33026

SUBJECT: FIVE ON HILL INC Ref. Number: W21000079784

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

You failed to make the correction(s) requested in our previous letter.

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

Please return 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.

Jessica A Fason Regulatory Specialist II

1787

Letter Number: 521A00011956

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: Five On Hill Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a [Five On Hill Inc (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
Florida
(Enter state, or if a non-U.S. entity, the name of the country)
04/23/2021 on
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Five On Hill, 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 also of accuration has been unproved in accordance with all applicable statutes

- 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 23rd day of April	
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Xx Printed Name: Keith N. Alarcon	Title: President
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Xett N. 11	
Signature: Xeth N. St. Printed Name: Keith N. Alaccon	Title: President
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
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 In-	Officer. corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> 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

ARTICLE I - N The name of the	Limited Liability Compan	ny is:
Five On Hill	I, LLC.	
(1	Must contain the words "Limited l	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - A The mailing addi		the principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
4195 Forest Hill D	rive	4195 Forest Hill Drive
0 01 51 4	2000	
Cooper City, FL 33		Cooper City, FL 33026
ARTICLE III - The Limited Liability business entity with a	Registered Agent, Regis Company cannot serve as its own active Florida registration.) e Florida street address of	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
ARTICLE III - The Limited Liability business entity with a	Registered Agent, Regis Company cannot serve as its own an active Florida registration.) e Florida street address of Keith N. Alarcon	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
ARTICLE III - The Limited Liability business entity with a	Registered Agent, Regis Company cannot serve as its own in active Florida registration.) e Florida street address of Keith N. Alarcon 4195 Forest Hill Drive	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: Name (P.O. Box NOT acceptable)
ARTICLE III - The Limited Liability business entity with a	Registered Agent, Regis Company cannot serve as its own in active Florida registration.) e Florida street address of Keith N. Alarcon 4195 Forest Hill Drive	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: Name

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:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Keith N. Alarcon
	4195 Forest Hill Drive Cooper City, FL 33026
	Cooper only, 12 occurs
	-
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(Use attachment if necessary)	Ĺ
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Kit	r. Slen
,	an authorized representative of a member
This document is executed in accordance	e with section 605,0203 (1) (b). Florida Statutes, I am aware iment to the Department of State constitutes a third degree for

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)