12/00/1359/3

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

EZP 2 9 2021

T. SCOTT



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COVER LETTER

TO:	New Filing S Division of C				
SUBJ	IECT: Smith H	ouse Holdings, LLC			
0000			sulting Florida l	Limited Cor	mpany)
The e	nclosed Article ess Entity" into	es of Conversion, Artic o a "Florida Limited L	les of Organiability Comp	ization, ar pany" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	e return all com	espondence concernin	g this matter	to:	
Katie I	Everlove-Stone,	Esq.			
		(Contact Person)			
Everlo	ve Legal, PLLC				
		(Firm/Company)			
5328 (Central Ave	•			
		(Address)			
St Pet	ersburg, FL 337	07			
	(City, State and Zip Code)			
marcy	leighsmith@gma	aif.com			
E-n	nail Address: (to b	e used for future annual re	port notification	1s)	
For fu	rther informati	on concerning this ma	tter, please c	all:	
Магсу	Smith		_at (\450-l	6413
	(Name of Conta	act Person)	ar ((Area C	ode) (Day	ytime Telephone Number)
		for the following amou a bank located in the			sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles enization)	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 F 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 27		New Divis The C	t Address: Filing Section tion of Corporations Centre of Tallahassee 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: Smith House Holdings, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of North Carolina (Enter state, or if a non-U.S. entity, the name of the country)
02/14/2019 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:
Smith House Holdings, 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.

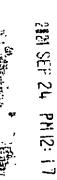


Signed this 218t day of Septem be	v 20 <u>21</u>
Signature of Authorized Representative of	Limited Liability Company:
Signature of Authorized Representative: 1/1 Printed Name: Marcy Smith	
Printed Name: Marcy Smith	Title: Manager
Signature(s) on bohalf of Other Business Ent	ity: [See below for required signature(s)]
Signature:	
Signature:Printed Name: Jeffrey Smith	Title: Manager
Signature:	
Printed Name:	Title:
Signatura	
Signature:	Title:
Signature: Printed Name:	Tid.
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Directo	r, or Officer.
If Directors or Officers have not been selected,	an Incorporator must sign.
If Florida General Partnership or Limited Li	ability Partnership
Signature of one General Partner.	and the same same.
If Florida Limited Partnership or Limited Li	ability Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organizati	
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Sommond of States.	\$5.00 (Optionar)

	ne:	
The name of the Li	mited Liability Company	is:
Smith House Holding	gs, LLC	
(Mu	st contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Ad	dress:	
The mailing addres	s and street address of the	principal office of the Limited Liability Company is
Principal Office A	.ddress:	Mailing Address:
1226 79th St S		1226 79th St S
St Petersburg, FL 33	707	CA Dear-share EL 22707
		St Petersburg, FL 33707
ARTICLE III - Re The Limited Liability Co business entity with an a	egistered Agent, Registe	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another
ARTICLE III - Re The Limited Liability Co business entity with an ac The name and the F	egistered Agent, Registe impany cannot serve as its own Re ctive Florida registration.)	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another
ARTICLE III - Re The Limited Liability Co business entity with an ac The name and the F	egistered Agent, Registe impany cannot serve as its own Re ctive Florida registration.) Florida street address of th Marcy Smith	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another
ARTICLE III - Re (The Limited Liability Co- business entity with an ac The name and the F	egistered Agent, Registe impany cannot serve as its own Re ctive Florida registration.) Florida street address of th Marcy Smith	red Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - Re (The Limited Liability Co- business entity with an ac The name and the F	egistered Agent, Registe impany cannot serve as its own Re ctive Florida registration.) Florida street address of the Marcy Smith Na 1226 79th St S	red Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - Re The Limited Liability Co business entity with an ac The name and the F	egistered Agent, Registe impany cannot serve as its own Re ctive Florida registration.) Florida street address of the Marcy Smith Na 1226 79th St S	red Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another the registered agent are:

ted 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.,

(CONTINUED)



A	R	TI	C1	LF	IV-

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

Marcy Smith

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	Marcy Smith
	1226 79th St S
	St Petersburg, FL 33707
MGR	Jeffrey Smith
	1226 79th St S
	St Petersburg, FL 33707
	
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(Use attachment if necessary)	
CLE Ve Oskan energiale en 18	
CLE V: Other provisions, if any.	
	
REQUIRED SIGNATURE:	
	- U
Mary L. Sm.	in
, , ,	
Signature of a member or a	an authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b). Florida Statutes. I am aware th nent to the Department of State constitutes a third degree felo

Typed or printed name of signce

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)