121000505206

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400373721394

09/21/21--01032--007 **155.00

2021 No. -1 PA 3: .

W21-0012891

4



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2021

STEVEN IVANKOVICH ATLAS APARTMENT HOMES 1 EAST ERIE STREET SUITE 525 253 CHICAGO, IL 60611

SUBJECT: ALLIANCE HTTX LLC Ref. Number: W21000128714

We have received your document for ALLIANCE HTTX LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Please complete the marked sections in the Articles of Conversion. A signature is missing.

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.

DANIEL LO'KEEFE Regulatory Specialist II

Letter Number: 121A00023186

COVER LETTER

TO: New Filing S Division of C				
SUBJECT: Alliance	•			
Sold Sold Sold Sold Sold Sold Sold Sold	(Name of Re	sulting Florida Limi	ed Cor	npany)
				nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
Steven Ivankovich				
	(Contact Person)	·····	•	
Atlas Apartment Home	es			
	(Firm/Company)		•	
1 East Erie Street Suit	te 525 253			
	(Address)		•	
Chicago, IL 60611				
(City, State and Zip Code)			
shanna.willis@atlasre	sidentialusa.com			
E-mail Address: (to b	e used for future annual re	port notifications)	•	•
For further informati	on concerning this ma	tter, please call:		
Shanna Willis		at (469	387-	7566
(Name of Conta	nct Person)	(Area Code)	(Day	rtime Telephone Number)
	or the following amou a bank located in the		rocess	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add				t Address:
New Filing S Division of C				Filing Section ion of Corporations
P.O. Box 632	-			Centre of Tallahussee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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 of Conversion is: ALLIANCE HTTX LIMITED PARTNERSHIP
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED PARTNERSHIP
(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)
06/14/2007 on
On (date of organization, formation or incurporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Alliance HTTX 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 12 day of April 27	20 Z (
Signature of Authorized Representative	of Limited Liability Company:
	X
Signature of Authorized Representative:	1 goet
Printed Name: Steven Ivankovich	Title: Managing Member
Signature(s) on behalf of Other Business	Entity: [See below for required signature(s)]
Signature:	X
Printed Name: Stown Ivankovich	Title: Managing Member
Timed Name. Steven Ivanikovich	Time: IManaging Member
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
£:	
Signature:	Tial
rinica Name.	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Dire	eutor, or Officer
If Directors or Officers have not been selected	
If Florida General Partnership or Limited	1 Liability Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited	I Liability Limited Partnership:
Signatures of ALL General Partners.	
A. 22 2	
All others:	
Signature of an authorized person.	
Fann	
Fees:	
Articles of Conversion:	\$25.00
indica of conversion.	Ψωσ. (Cγ

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

··i

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Alliance HTTX LLC		
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC	.")
ARTICLE II - Address:		
The mailing address and street address of the pri	ncipal office of the Lir	nited Liability Company is:
Principal Office Address:	Mailing Address:	
1 East Erie Street Suite 525 253	1 East Erie Street Suite	e 525 253
Chicago, IL 60611	Chicago, IL 60611	
		
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designat	
The name and the Florida street address of the re	gistered agent are:	
STEVEN IVANIA Name	OURH	_
Name		· ·
791 Crandon	Blud	*,
Florida street address (P.O.	Box NOT acceptable)	-
Key Biscayne	FL 33149	, -
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete paccept the obligations of my position as registered Agent's Signature.	this certificate, I hereby ty. I further agree to co erformance of my dutie istered agent as provide mature (REQUIRED)	vaccept the appointment as emply with the provisions of all s, and I am familiar with and
		

•	D7	Γ14	ויי	F	IV-
$\boldsymbol{\Lambda}$				48.	1 T ~

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Steven Ivankovich
	1 East Erie Street Suite 525 253
	Chicago, IL 60611
	2:
	Þ.
ZII	-
(Use attachment if necessary)	
T.E.V. Other provisions, if any	· •
TLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	1
	
X	L
	7
Signature of a member or	an authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, I am awa
any false information submitted in a docu as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree
as provided for the state, 155, F.S.	
Steven Ivankovich	
Ту	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)