12100517751

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

Office Use Only



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11/29/21--01036--004 **150.00



COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Herrman Investments, LLC				
(Name of Resul	ting Florida Limit	ed Comp	pany)	
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lia"	s of Organizati bility Company	on, and " in acc	fees are submitted to convert an "Other cordance with s. 605.1045, F.S.	
Please return all correspondence concerning	this matter to:			
Carol Kregel		_		
(Contact Person)				
Kelleher + Holland LLC		_		
(Firm/Company)		_		
102 S. Wynstone Park Drive				
(Address)		_		
North Barrington, IL 60010				
(City, State and Zip Code)		_		
ckregel@kelleherholland.com				
E-mail Address: (to be used for future annual rep	ort notifications)			
For further information concerning this matt	ter, please call:			
Carol Kregel	at (847	713-1	time Telephone Number)	
(Name of Contact Person)	(Area Code) (Day	time Telephone Number)	
Enclosed is a check for the following amoundollars and drawn on a bank located in the U	nt: (All checks Jnited States)	process	sed by this office must be payable in US	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\begin{array}{l} \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	_	\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 AND SERVE SHAPE STANDARD PARTIES AND SERVE STANDARD PARTIES	FILE

INHS11 (7/17)

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.
Herrman Investments, LLC
(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 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)
12/12/2002 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Herrman Investments, 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 19th day of November	_20 <u>_21</u>
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: Robert W. Herrman	lutu - Hun Title: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Roluti. Hum	
Printed Name: Robert W. Herrman	Title: Manager
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature	
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Timed Name.	Trice.
If Florida Corporation:	065
Signature of Chairman, Vice Chairman, Director, or of If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
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	ame:		
The name of the	Limited Liability Compa	ıny is:	
Herrman Investme		Liability Company, "L.L.C.," or "LLC.	<u>"</u>
(widst contain the words. Emilied	Elability Collipany, E.E.C., or EEC.	•)
ARTICLE II - A The mailing add		the principal office of the Lin	nited Liability Company is:
Principal Office	e Address:	Mailing Address:	
1579 Heights Cou	ırt	1579 Heights Court	
Marco Island, FL	34145	Marco Island, FI 34145	5
· · · · · · · · · · · · · · · · · · ·		-	
(The Limited Liability business entity with	Company cannot serve as its ow an active Florida registration.)	istered Office, & Registered on Registered Agent. You must designate of the registered agent are:	
The name and a	e i fortua street audress e	n the registered agent are.	
	Robert W. Herrman		_
		Name	
	1579 Heights Court		
,	Florida street addres	s (P.O. Box <u>NOT</u> acceptable)	_
	Marco Island	FL 34145	
	City	Zip	_
liability con registered age statutes relai	mpany at the place design nt and agree to act in this ting to the proper and con	t and to accept service of proce pated in this certificate, I hereby capacity. I further agree to co applete performance of my duties as registered agent as provide	v accept the appointment as amply with the provisions of all s, and I am familiar with and
	Ros	atu. Hun	
	Registered Agent	's Signature (REQUIRED)	7
	(CO	ONTINUED)	PILE, 2021 NOV 29 PM , SLICKE JAKEY LE STA
			TAITE OPRIDA

l'itla:	Name and Address:
<u>Γitle:</u> 'AMBR" = Authorized Member	Tignio and Tigoryou
'MGR" = Manager	
MGR	Robert W. Herrman
	1579 Heights Court
	Marco Island, FL 34145
	•
(Use attachment if necessary) LE V: Other provisions, if any.	
,	
(Use attachment if necessary) LE V: Other provisions, if any. REQUIRED SIGNATURE:	Robertin Human
LE V: Other provisions, if any. REQUIRED SIGNATURE:	Roluti. Hmme_
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member This document is executed in accordance.	Rolution Human — er or an authorized representative of a member redance with section 605.0203 (1) (b), Florida Statutes. I am aware that a document to the Department of State constitutes a third degree felony
LE V: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member This document is executed in accordany false information submitted in a	er or an authorized representative of a member dance with section 605.0203 (1) (b), Florida Statutes. I am aware that a document to the Department of State constitutes a third degree felony
REOUIRED SIGNATURE: Signature of a member This document is executed in accordany false information submitted in a as provided for in s.817.155, F.S.	er or an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member This document is executed in accordany false information submitted in a as provided for in s.817.155, F.S. Robert W. Herrman	r or an authorized representative of a member redance with section 605.0203 (1) (b), Florida Statutes. I am aware that a document to the Department of State constitutes a third degree felony Typed or printed name of signce Filing Fees
REOUIRED SIGNATURE: Signature of a member This document is executed in accordany false information submitted in a as provided for in s.817.155, F.S. Robert W. Herrman \$125.00 Filing Fee for Articles	er or an authorized representative of a member dance with section 605.0203 (1) (b), Florida Statutes. I am aware that a document to the Department of State constitutes a third degree felony Typed or printed name of signce Filing Fees cles of Organization and Designation of Registered Agents
REQUIRED SIGNATURE: Signature of a member This document is executed in accordany false information submitted in a as provided for in s.817.155, F.S. Robert W. Herrman	er or an authorized representative of a member dance with section 605.0203 (1) (b), Florida Statutes. I am aware that a document to the Department of State constitutes a third degree felony Typed or printed name of signce Filing Fees cles of Organization and Designation of Registered Agents