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February 28, 2022

JENNIFER WHEAT 4115 HENDRICKS AVE JACKSONVILLE, FL 32207

MH Property management Capital SUBJECT: MH PROPERTY MANAGEMENT, LLC

Ref. Number: W22000025663

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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Karen Lovelace Regulatory Specialist II New Filing Section

Letter Number: 522A00004871

## COVER LETTER

TO:	New Filing : Division of (					
CIIDI	RCT. MH Pro	pony Management <del>, LL</del> G	Capadal L	LĊ		
SCIM	EX.1.	pony Management <del>, LLC</del> (Name of Re	sulting Florida L	imited Co	mpany)	
					nd fees are submitted to conveneecordance with s. 605,1045, I	
Please	return all con	respondence concernir	ng this matter t	0:		
Jannifo	or Wheat					
	······································	(Contact Person)				
Law O	ffice of David M	. Goldman LLC				
		(Firm/Company)				
4115 H	อกอีกได้หร Avonu	10				
		(Address)				
Jackso	nville, FL 32201	7				
		City, State and Zip Code)				
	@goldman.law					
E-m	nil Address: (to h	e used for future annual re	port notification	1)		
or fur	ther informati	on concerning this ma	itter, please cai	il:		
Jonnife	r Wheat		nt (904	\685-	1200	
	(Name of Conta	ct Person)	(Area Co	de) (Day	1200 vtime Telephone Number)	
		or the following amou a bank located in the			sed by this office must be paya	ible in US
\$25 for £ \$125 f		☐\$155.00 Filing Fees and Certificate of Status			□\$185.60 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Addy New Filing So Division of Co P.O. Box 632' Tallahassec, F	orporations 7		New I Divisi The C 2415	t Address; Filing Section ion of Corporations centre of Tallahassee N. Monroe Street, Suite 810 passee, 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 5.605.1045, Florida Statutes.

MH Property Management ( Copylet), Life
(Enter Name of Other Business Entity)
The "Other Business Entity" is a [Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(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)
5/19/2015 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MH. Property Management, ELC IVILL Property I Management (apolal, 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 men 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 2nd day of February	20_22
Signature of Authorized Representative of Lin	ited Liability Company:
Signature of Authorized Representative: 444 Printed Name: Mathew Hollanday	Title: Managing Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: Malhew Holladay	Tide: Managing Member
Si manada anna	
Signature: Printed Name:	Title:
1111100 110110	
Signature:	
Signature: Printed Name:	Tide:
Signature: Printed Name:	Tista.
Finited Name.	
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Timod (Abde.	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	ity Parinerahip:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Umited Partnershin:
All others: Signature of an authorized person.	
Fecs;	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	; is:
MH Property Management, ELC (VI) 1 13.  (Must contain the words "Limited Lie	porty Managana At Capton, LLC
ARTICLE II - Address:	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2571 S. Ponte Vedre Blvd. Ponte Vedra Beach, FL 32082	2571 S. Ponte Vedra Blvd. Ponte Vedra Beach, FL 32082
Polito Vocita Boach, 1 2 32002	TORRE TORREST, TEOLOGIC
business entity with an active Florida registration.)  The name and the Florida street address of the David M. Goldman	egistered Agent. You must designate an individual or another he registered agent are:
	BITTLE
4115 Hendricks Avenue	
	P.O. Box NOT acceptable)
Jecksonville	FL 32207 Zip
City	Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complete.	ed to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of a size performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S
Registered Agent's S	ignature (REQUIRED)
(CONT	INUED)

Title:	Name and Address;		
"AMBR" = Authorized Member			
'MGR" = Manager	Mathew Holladay		
MQRRDM			
	2571 S. Ponta Vedra Blvd.		
	Ponte Vedra Beach, FL 32082		
<del></del>			
(Use attachment if necessary)  LE V: Other provisions, if any.			
<u>REQUIRED</u> SIGNATURE:			
reoutred signature:			
Signature of a member or	an authorized representative of a member of with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree for		
Signature of a member or This document is executed in accordance any false information submitted in a document provided for in a 817.155, F.S.  Mathew Holaday, Manager	an authorized representative of a member of with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree in		
Signature of a member or This document is executed in accordance any false information submitted in a document provided for in a 817.155, F.S.  Mathew Holaday, Manager	an authorized representative of a member		

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

ARTICLE IV-

Amado Taristo