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	Requesto	or's Name)	
	(Address)	<u> </u>	
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	(City/State	e/Zip/Phone	#)
PICK-UF		WAIT	MAIL
<u> </u>	(Business	Entity Nam	e)
	(Documei	nt Number)	
Certified Copies		Certificates	of Status
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2022 MAY 10 PM 3: 25 SEDRETARY OF STATE TALLAHASSEE, FL

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

OCUMENT NUM	BER Please rush! CI	lient needs for Closing.
	PLEASE FILE THE AT	TACHED AND RETURN
xxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
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	Certificate of Status Reflecting **APOSTILLE' / NOTA	ARIAL CERTIFICATION**
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COVER LETTER

TO: New Filing Sec Division of Cor				
SUBJECT: Referral Re	ealty Group, LLC			
SUBJECT.	(Name of Res	sulting Florida Limi	ted Con	npany)
The enclosed Articles of Business Entity" into a	of Conversion, Artic "Florida Limited Li	les of Organizati iability Company	ion, an	d fees are submitted to convert an "Othe coordance with s. 605.1045, F.S.
Please return all corres	pondence concernin	g this matter to:		
C. Neil Gregory, Esq.				
	(Contact Person)		-	
Bond, Schoeneck & King), PLLC			
	(Firm/Company)		-	
4001 Tamiami Trail Nortl	h, Suite 105			
· · · · · · · · · · · · · · · · · · ·	(Address)		•	
Naples, FL 34103				
(Cit	y, State and Zip Code)		-	
ngregory@bsk.com				
E-mail Address: (to be	used for future annual re	port notifications)	•	
For further information	concerning this ma	tter, please call:		
C. Neil Gregory		at (239)_659-	3844
(Name of Contact	Person)	(Area Code)	(Day	time Telephone Number)
Enclosed is a check for dollars and drawn on a			rocess	sed by this office must be payable in US
(\$25 for Conversion a	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Cop		S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address New Filing Sectorial Division of Cortal P.O. Box 6327 Tallahassee, FL	tion porations		New I Divisi The C 2415 I	t Address: Filing Section on of Corporations lentre of Tallahassee N. Monroe Street, Suite 810 massee, FL 32303

Articles of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

FILED

2022 MAY 10 PM 3: 25

SECRETARY OF STATE
TALLAHASSEE. FL

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: Premier Properties of Southwest Florida, Inc. (2) 3720
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
12/16/1982 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:
Premier Properties of Southwest Florida, 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	29th day of April	20_22
Signature o	f Authorized Representative of Lin	nited Liability Company:
Signature o	Authorized Representative of St.	111
Signature of	Authorized Representative:	
Printed Nam	Howard B. Gutman	Title: Vice President/Authorized Person
Signature(s)	on hehalf of Other Rusiness Entity:	[See below for required signature(s)]
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Signature: _	/AD	
Printed Nam	Howard B. Gutman	Title: Vice President
Signature:		
Printed Nam	>:	Title:
Signature:		Title:
rimied ivami		Title.
Signature: _		
Printed Name	:	Title:
Signature:		
Printed Name);	Title:
Signature: _		Title:
Printed Name	:	Title:
If Florida Co	orporation:	
	Chairman, Vice Chairman, Director, or	r Officer.
If Directors o	r Officers have not been selected, an Is	ncorporator must sign.
rentania C	eneral Partnership or Limited Liab!	lity Partnerchin
Signature of	one General Partner.	nty Farthersuip.
318141410 01		
	<u>mited Partnership or Limited Liabil</u>	ity Limited Partnership:
Signatures of	ALL General Partners.	
All others:		
	n authorized person.	
_	<u>-</u>	
Fees:		
Artic	es of Conversion:	\$25.00
	for Florida Articles of Organization:	\$125.00
	ied Copy:	\$30.00 (Optional)
	icate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Company, "L.L.C.," or "LLC.")	
ncipal office of the Limite	d Liability Company is:
Mailing Address:	
4001 Tamiami Trail North	
Suite 350	
Naples, FL 34103	
gistered agent are:	SECRETARY OF FALLAHASSE
	ARAS I
105	SS
Box NOT acceptable)	PH 3: 20
FL 34103	C 25
Zip	
accept service of process for this certificate, I hereby accept flurther agree to complete formance of my duties, and stered agent as provided for ture (REQUIRED)	cept the appointment as y with the provisions of all
	Mailing Address: 4001 Tamiami Trail North Suite 350 Naples, FL 34103 Office, & Registered Age red Agent. You must designate an in gistered agent are: 105 Box NOT acceptable) TL Zip accept service of process for his certificate, I hereby accept formance of my duties, and stered agent as provided for ture (REQUIRED)

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
Vice President	Howard B. Gutman
	4850 Tamiami Trail North, Suite 200
	Naples, FL 34103
	
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(1)	TE
(Use attachment if necessary)	
LE V: Other provisions, if any.	
	22/8
	Z (Z, V/ #
REQUIRED SIGNATURE:	////\
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	AAS
	AAS
Signature of a member or a	an authorized representative of a member
Signature of a member or a	with section 605,0203 (1) (b), Florida Statutes, I am aware t
Signature of a member or a This document is executed in accordance any false information submitted in a document i	with section 605,0203 (1) (b), Florida Statutes. I am aware t
Signature of a member or a	with section 605,0203 (1) (b), Florida Statutes, I am aware t
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605,0203 (1) (b), Florida Statutes, I am aware t
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Howard B. Gutman	with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fellower.
Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. Howard B. Gutman	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree feltoged or printed name of signee Filing Fees

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

ARTICLE IV-

Company: