

U22000375821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

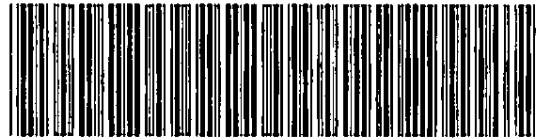
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100387038141

05/02/22--01057--003 ++137.50

07/26/22--01026--005 ++43.00

FILED

2022 JUL 26 AM 8:57

M

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Sky Land IV, LLC
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Holly H Hudson
(Contact Person)

Sky Land IV, LLC
(Firm/Company)

355 Inlet Ave
(Address)

Merritt Island, FL 32953
(City, State and Zip Code)

Skypropertiesusa@gmail.com
E-mail Address (to be used for future annual report notifications)

For further information concerning this matter, please call:

Holly Hudson at (702) 481-7202
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☐ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☒ \$185.00 Filing Fees, ^{*47.50}
Certified Copy, and
Certificate of Status *Already sent *137.50*

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Subject: SKY LAND IV, LLC
Ref. Number: W22000069658
Letter Number: 122A00011976

RECEIVED
2022 JUL -6 AM 10:30
EDUCATION
COMMERCIAL
SERVICES

Hi Jessica!

Included is Check #2112 for \$48.00. When I returned the application on June 7, 2022, I placed Check #2111 for \$47.50 in the manila envelope. I am not sure why it did not arrive with the application.

I have stopped payment on that check with the bank. Being that this check would be identical, except for one number, I changed the amount so it would not accidentally get flagged. I do not need the difference returned.

I have called many times, including starting exactly at 8 am, and I have always been disconnected by a message saying to call back again later. I've been anywhere from caller 5 to 47 and it always disconnects me after 30-60 minutes.

If there are any issues, please, feel free to call me anytime.

Thank you for your help! I look forward to getting this business running here in Florida!

Sincerely,

Holly Hudson
702-481-7202 cell



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2022

HOLLY HUDSON
355 INLET AVE
MERRITT ISLAND, FL 32953

SUBJECT: SKY LAND IV, LLC
Ref. Number: W22000069658

We have received your document for SKY LAND IV, LLC and check(s) totaling \$137.50 of which \$137.50 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$47.50 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The Certificate of Conversion must be signed by an authorized person.

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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 122A00011976

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:

Sky Land IV, LLC
(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited liability 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 Illinois
(Enter state, or if a non-U.S. entity, the name of the country)

on March 1, 2018
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

Sky Land IV, LLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: Date of Filing.

(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.

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2022 JUL 26 AM 8:46
STATE

Signed this 4 day of June 2022

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Holly A. Hudson
Printed Name: Holly Title: owner

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: Holly A. Hudson
Printed Name: HOLLY HUDSON Title: Ambr

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

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:

Sky Land IV, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

355 Inlet Ave
Meritt Island, FL 32953

Mailing Address:

355 Inlet Ave
Meritt Island, FL
32953

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

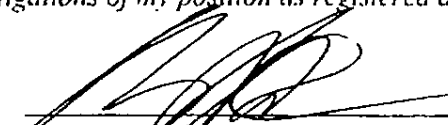
The name and the Florida street address of the registered agent are:

Green Solutions Accounting Firm, Inc. : Andrew Green
Name

404 N. Ronald Reagan Blvd Suite 1120
Florida street address (P.O. Box NOT acceptable)

Longwood FL 32750
City Zip

Having been named as registered agent and to accept service of process for the above stated limited 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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Holly Hudson
355 Inlet Ave
Merritt Island, FL 32953

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

Holly H Hudson

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 aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

HOLLY H HUDSON

Typed 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)

FILED
2022 JUL 26 AM 8:46
STATE
FL