# 12300146207

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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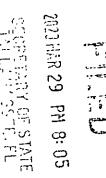
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### **COVER LETTER**

SUBJECT: HOMES	TEAD HOUSE BUYER I	-rc			
	(Name of Re	sulting Florida Lin	nited Con	npany)	
The enclosed Article Business Entity" into	es of Conversion, Artic o a "Florida Limited L	les of Organiza iability Compa	ition, an ny" in a	nd fees are submitted to c ccordance with s. 605.10	onvert an "Othe 45, F.S.
Please return all corr	espondence concernin	g this matter to	;		
TROY LEDFORD					
	(Contact Person)		<del></del> -		
HOMESTEAD HOUSE	BUYER LLC				
	(Firm/Company)		<del></del>		
32164 SW 203rd CT					
	(Address)		_		
HOMESTEAD,FL 330	30				
	City, State and Zip Code)				
HB7197@gmail.com	, , , , , , , , , , , , , , , , , , , ,				
E-mail Address: (to b	oe used for future annual re	port notifications)	_		
For further informati	on concerning this ma	tter, please call	:		
TROY LEDFORD		at ( <sup>305</sup>	)345 -	- 2469	
(Name of Conta	act Person)	_ \		rtime Telephone Number)	
Enclosed is a check to dollars and drawn or	for the following amou a bank located in the	int: (All checks United States)	process	sed by this office must be	payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filir and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 27		New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite hassee, FL 32303	\C\ \\i\!

**TO:** New Filing Section Division of Corporations

#### **Articles of Conversion**

For

## "Other Business Entity"

Into

# Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> 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 LANDONDS HOMESTEAD INC	prior to the filing of the Articles of Conversion is:
(Enter Name of Other Busines	s Entity)
2. The "Other Business Entity" is a CORPORATION	
(Enter entity type. Example: corporation, limited par	rtnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of	f FLORIDA
	Enter state, or if a non-U.S. entity, the name of the country)
10/11/2022 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company a HOMESTEAD HOUSE BUYER LLC	as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liabili	ity Company)
4. If not effective on the date of filing, enter the effective (The effective date: Cannot be prior to date of receipt the date this document is filed by the Florida Departr Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	or filed date nor more than 90 calendar days after ment of State.)
5. The plan of conversion has been approved in accordan	nce with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to which such members are entitled under ss. 605.1006 and	pay any members having appraisal rights the amount to d 605.1061-605.1072, F.S.

Signed this 27 day of FEBURARY	_20 <u><b>23</b></u>	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: 100 Printed Name: TROY P LEDFORD	Title: PRES	
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)	]
Signature: TROV PLEDEORD	orpe	<u></u>
Printed Name: TROY P LEDFORD	Title: PRES	<del></del>
Signature: Printed Name:	Title:	_
Signature:Printed Name:	Title:	
Signature:	T'.4	<u>.                                    </u>
Printed Name:	·	
Signature:Printed Name:	Title:	<u> </u>
Signature:		
Printed Name:	Title:	<u> </u>
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer. corporator must sign.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		o 2
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	2023 MAR 29 PM 8: 05 SEGRETARY OF STATE TALLADIASSEE, FL

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	ame: Limited Liability Company	y is:	
HOMESTEAD HO	USE BUYER LLC		
(N	Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A The mailing addr		ne principal office of the Limi	ted Liability Company is:
Principal Office	Address:	Mailing Address:	
32164 SW 203rd C	<u>et</u>	32164 SW 203rd CT	
HOMESTEAD,FL	33030	HOMESTEAD,FL 33030	
ousiness entity with a	n active Florida registration.) e Florida street address of t	Registered Agent. You must designate a	
	TROY LEDFORD	lame	
		anne	
	32164 SW 203rd CT	DO D NOT	
		P.O. Box NOT acceptable)	
	HOMESTEAD	FL 33030	
	City	Zip	
nability com registered agen statutes relatii	ipany at the place designate It and agree to act in this ca ng to the proper and compl	nd to accept service of processed in this certificate, I hereby a pacity. I further agree to compete performance of my duties, a registered agent as provided	accept the appointment as ply with the provisions of all and I am familiar with and

### ARTICLE IV-

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

"AMBR" = Authorized Member	
"MGR" = Manager	
PRES	TROY P LEDFORD
	32164 SW 203rd CT
	HOMESTEAD, FL 33030
	-
(Use attachment if necessary)	
(Use attachment if necessary)  LE V: Other provisions, if any.	
LE V: Other provisions, if any.	I Lafford pa
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am award ment to the Department of State constitutes a third degree f
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a document in a doc	with section 605,0203 (1) (b). Florida Statutes, Lam aware
Signature of a member or any false information submitted in a docur as provided for in s.817.155, F.S.  TROY P LEDFORD	with section 605.0203 (1) (b), Florida Statutes. I am award nent to the Department of State constitutes a third degree f
Signature of a member or any false information submitted in a docur as provided for in s.817.155, F.S.  TROY P LEDFORD	with section 605.0203 (1) (b), Florida Statutes. I am award nent to the Department of State constitutes a third degree f
Signature of a member or a This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.  TROY P LEDFORD	with section 605.0203 (1) (b), Florida Statutes. I am award nent to the Department of State constitutes a third degree f