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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
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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EXAMINER

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SECKEDAKY OF STATE
AND AN ASSEF, FLORID.

COVER LETTER

_	tion Section of Corporations		
SUBJECT:	Four Diaz Var (Name of Resulting	gas Guz Torida Limited Company	Zumrell Inc.
convert an "Oth	ertificate of Conversion, Amer Business Entity" into a 's. 608.439, F.S.		
Please return all	correspondence concernin	g this matter to:	
Carlos t	1 Cruz (Contact Person)		
	(Firm/Company) Expused Park (Address)	ŭ	. zoo ste 250
Juckens	(City, State and Zip Code)	56	
For further infor	mation concerning this ma	atter, please call: _at (_ 904)2	214-5724 Paytime Telephone Number)
Enclosed is a ch	eck for the following amou	unt:	
☐ \$150.00 Filing I (\$25 for Conversion & \$125 for Articles of Organization)	n and Certificate of	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

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Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate 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.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: Four Diaz VArgas Cruz Runrell, INC (Enter Name of Other Business Entity)	891
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)	
(Enter state, or if a non-U.S. entity, the name of the country)	
on //29/09 (Enter date "Other Business Entity" was first organized, formed or incorporated)	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
Four Diaz VArgas Cruz Runrell, LLC (Enter Name of Florida Limited Liability Company)	
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this	
document is filed by the Florida Department of State; AND 2) must be the same the effective date listed in the attached Articles of Organization, if an effective date is the listed therein.)	Carper
Page 1 of 2	

Signed this 7 ^{+k} day of May	20.09
Signature of Member or Authorized Representation	ative of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: LANOS M. Cruz	C: Tarle: VP
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).
Signature: Printed Name: Arlos M. Cruz	
Signature: Printed Name:	Title
Signature:Printed Name:	Title:
Signature:Printed Name:	Tida
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	,
Fees:	TAL S
Certificate 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 - Name:

The name of the Limited Liability Company is:
Four Diaz Vargas Cruz Rumrel LLC (Must end with the word "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: Mailing Address:
10151 Deenwood Park Blud Same Building 700 Suite 750 Dacksonwille, 151. 32256
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:
Carlos M. Chuz
10151 Devruso d Rurk Blud. Building 200 Suite 250 Florida street address (P.O. Box NOT acceptable)
Schemuille FL 32256 City, State, and 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 cluties, and I am familiar with and accept the obligations of my position as registered agent as provided for in hapter 608. It is a segment of the provision of all statutes relating to the provision of the provisions of all statutes relating to the provision of the provisions of all statutes relating to the provision of the provisions of all statutes relating to the provision of the provisions of all statutes relating to the provisions of all statutes relating to the provision of the provisions of all statutes relating to the provision of the provisions of all statutes relating to the provision of the provisions of all statutes relating to the provision of the provisions of all statutes relating to the provision of the provisions of all statutes relating to the provision of the provisions of all statutes relating to the provision of t

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	CARIOS M. Cruz 841 Pridential Dr., 12th FL JACKSONVIlle FL 32207
MGRM	Dylan A. Rumpell 1010 March Wind Way Pente Vedra Beach FL 32082
MGRM	Allan VAIgas 2332 Galiano Street 2nd FL Com Gables FL 33134
MGRM	Jose G Piaz 2332 Galiano Street 2nd FL Coral Gables, FL 33134 (Use attachment if necessary)
ARTICLE V: Effective date, if other than the da (The effective date: 1) cannot be prior to nor document is filed by the Florida Department the effective date listed in the attached Cert date is listed therein.) REQUIRED SIGNATURE:	(OPTIONAL) more than 90 days after the date this of State; <u>AND</u> 2) must be the same as
	9 9
Signature of a member of an author	prized representative of a member.
(In accordance with section 608.408 of this document constitutes an affirm that the facts stated CAFLOS M. Typed or printed	nation under the penalties of perjury d herein are true.) A
Filing Fees: \$125.00 Filing Fee for Articles of O of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) Page 2 of	onal)