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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEF E DRING

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October 3, 2014

DIANE HERNANDEZ 100 BRICKELL AVE SUITE 300 MIAMI, FL 33131

SUBJECT: ALDRES MIRAMAR, LLC

Ref. Number: W14000060294

We have received your document for ALDRES MIRAMAR, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of 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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 114A00021155

ADAMS GALLINAR Professional Association

VIA FEDEX

September 26, 2014

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

Re: Aldres Miramar, LLC (the "Company")- Conversion

To whom it may concern:

Enclosed for filing are the Articles of Conversion for "Other Business Entity" Into Florida Limited Liability Company. Also enclosed is a check in the amount of \$150.00 representing the Filing Fee and Fee for Conversion.

Please note that the Company's original jurisdiction was Delaware with a qualification to do business in Florida.

In the event you have any questions, please do not hesitate to contact me.

Diane M. Hernandez

Legal Assistant to Robert R. Adams

Enclosures

COVER LETTER

то:	Registration S Division of Co					
SUBJ	ECT: ALDRE	S MIRAMAR, LLC				
		(Name o	f Re	sulting Florida	Limited	d Company)
						d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	thi	s matter to:		
Diane	M. Hernande	ez.				
		(Contact Person)				
Adam	ns Gallinar, P.					
		(Firm/Company)				
1000	Brickell Avenu				•	
		(Address)				
Miam	i, Florida 3313					
	-	City, State and Zip Code)				
	andez@agila			4:6:4:		
E-m	iaii Address: (to be	e used for future annual rep	югі і	nouncations)		
For fu	rther information	on concerning this mat	ter,	please call:		
Diane	M. Hernande	2Z	at	(305	416-	6800
	(Name of Contac	et Person)	_		(Dayı	time Telephone Number)
Enclos	sed is a check for	or the following amou	nt:			
(\$25 for & \$125	0.00 Filing Fees r Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I d Certified Copy		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Regist Division Clifton 2661 I	ET ADDRESS ration Section on of Corporati Building Executive Center assee, FL 3230	ons er Circle		Registra Division P. O. Bo	ntion S n of Co ox 632	orporations

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

Statutes.	
1. The name of the "Other Business Entity" immediately prior to the filing of the Artic ALDRES MIRAMAR, LLC	les of Conversion is:
(Enter Name of Other Business Entity)	-'
2. The "Other Business Entity" is a LLC	
(Enter entity type. Example: corporation, limited partnership general partnership, common law or business trust, etc.)	<u>-</u> .
First organized, formed or incorporated under the laws of Delaware	
on December 8, 2011 (Enter state, or if a non-U.S. entity, the	e name of the country)
(date of organization, formation or incorporation)	
The name of the Florida Limited Liability Company as set forth in the attached Art Aldres Miramar, LLC (Enter Name of Florida Limited Liability Company)	- Organization.
4. If not effective on the date of filing, enter the effective date. (The effective date: 1) cannot be prior to date of receipt or filed date nor more that date this document is filed by the Florida Department of State; AND 2) must be the date listed in the attached Articles of Organization, if an effective date is listed the	e same as the effective
5. The plan of conversion has been approved in accordance with all applicable statutes.	 1
Page 1 of 2	14 OCT -9 PH SEGRETARY OF ALLAHASSEE.

Signed this 25	day of <u>September</u>	20_14		
Signature of Authorize	ed Representative of Lin	nited Liability Company:		
Signature of Authorized	l Representative:	Hellett -		,
Printed Name: Robert F	<u>≀. Adams, Esq.</u>	Prine: Authorized Representative		
Signature(s) on behalf	of Other Business Entity:	[See below for required signature(s).]		
Signature:	Lalette -			
Printed Name: Robert R	≀. Adams, ⊭ sq.	Title: Authorized Representative		
Signature:				
Printed Name:		Title:		
Signature: Printed Name:		Title:		
Signature:		Title:		
Printed Name:		Title:		
Signature:				
Printed Name:		Title:		
Signature:				
Printed Name:		Title:		
If Florida Corporation:				
	Vice Chairman, Director, or	Officer.		
	ave not been selected, an In			
If Florida General Parts	nership or Limited Liabil	ity Partnershin:		
Signature of one General	Partner.			
If Florida Limited Parts Signatures of ALL Gener	nership or Limited Liabili	ity Limited Partnership:		
Signatures of ALL Gener	ai Partners.		Žo	
All others:			TLAH,	
Signature of an authorized	d person.			£1,""
Fees:			-9 ARY SSE	CETAMOR. EYunniss
Articles of Conve	ersion:	\$25.00		News and
	Articles of Organization:	\$125.00	3: 5 કાસા મુક્કસ	Constant
Certified Copy:	-	\$30.00 (Optional)	2일 51	Vag 2 Pr
Certificate of Sta	tus:	\$5.00 (Optional)	i.	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	·
ALDRES MIRAMAR, LLC (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1000 Brickell Avenue Suite 300	2775 NE 187 Street PH 18
Miami, Florida 33131	Aventura, Florida 33180
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	red Agent. You must designate an individual or another
AGI Registered Agents, In	<u>c. </u>
Name	
1000 Brickell Avenue, Suit	a 300
Florida street address (P.O. 1	
Miami	FL 33131
City	Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S

(CONTINUED)

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Alfonzo Ruiz Amigo	
	2775 NE 187 Street, PH 18	
	Aventura, Florida 33180	
AMBR	Adriana Eyleen Veracoechea Cardoza	
	2775 NE 187 Street, PH 18	
	Aventura, Florida 33180	
	-,_, **	
ffective date is listed, the date r	on the date of filing: (OPTION nust be specific and cannot be more than five busines	JAL) s day
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ARTICLE IV-