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(Red	questor's Name)	<u>-</u>
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
FALLAHASSEE FLORIDA

JUN 1 2 2018
T SCHROEDER

COVER LETTER

Division of Corporations		
SUBJECT. BENSIDE CONTRACTING GROU	JP LLC	
SUBJECT: BENSIDE CONTRACTING GROUND (Name of Re	sulting Florida Limi	ed Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L		on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	
NOEL JOSE BENDANA JR		
(Contact Person)		
BENSIDE CONTRACTORS GROUP LLC		
(Firm/Company)		
10261 SW 20 ST		
(Address)	-	
MIAMI, FL 33165		
(City, State and Zip Code)		
BENSIDECONTRACTORS@HOTMAIL.COM		
E-mail Address: (to be used for future annual re	port notifications)	
For further information concerning this ma	tter, please call:	
NOEL JOSE BENDANA JR	at (305	S910-6272
(Name of Contact Person)	(Area Code))910-6272 (Daytime Telephone Number)
	ınt: (All checks p	rocessed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$5 certificate of Status		
STREET ADDRESS:	MAILI	NG ADDRESS:
New Filing Section		ing Section
Division of Corporations		of Corporations
Clifton Building 2661 Executive Center Circle		ox 6327 ssee, FL 32314
Tallahassee, FL 32301	ганана	55CE, FL 32314

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: BENSIDE CONTRACTORS GROUP INC 718-50035
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
06/01/2018 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: BENSIDE CONTRACTORS GROUP LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 06/07/2018
(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 <u>07</u> day of <u>JUNE</u>	20_18			
Signature of Authorized Representative of L	imited Liability Company:			
Signature of Authorized Representative:	Title: MGR			
Signature(s) on behalf of Other Business Entit	y: [See below for required signature(s)]			
Signature: Printed Name; NOEL JOSE BENDANA JR	and DECEMENT			
Printed Name; NOEPJOSE BENDANA JR	Title: PRESIDENT			
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 Lia Signature of one General Partner.	bility Partnership:			
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.				
All others: Signature of an authorized person.				
<u>Fees:</u>				

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

TILED

18 JUN-8 AM 10: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Name: The name of the Limited Liability Company is: BENSIDE CONTRACTORS GROUP LLC (Must contain the words "Limited Liability Company, "LL.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Principal Office Address: Mailing Address: Mailing Address:		WILLED ELABILITY CONTRAINY
BENSIDE CONTRACTORS GROUP 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 Principal Office Address: Mailing Address: Mailing Address Mailing Address		
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ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Principal Office Address: Mailing Address Mailing		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Principal Office Address: Mailing Address: 10261 SW 20TH ST	DE CONTRACTORS GROUP LLC	
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The mailing address and street address of the principal office of the Limited Liability Principal Office Address: Mailing Address: Mailing Address:	TIFIT Address	
Principal Office Address: 10261 SW 20TH ST MIAMI, FL 33165 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signa (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or as business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: EDWARD HAWKINS Name 1030 NW 3RD STREET Florida street address (P.O. Box NOT acceptable) MIAMI FL 33165 City Zip Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate. I hereby accept the apport registered agent and agree to act in this capacity. I further agree to comply with the prostatutes relating to the proper and complete performance of my duties, and I am familiaccept the obligations of my position as registered agent as provided for in Chapter		of the Limited Linkilling Comme
10261 SW 20TH ST MIAMI, FL 33165 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signa (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or as business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: EDWARD HAWKINS Name 1030 NW 3RD STREET Florida street address (P.O. Box NOT acceptable) MIAMI FL 33165 City Zip Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate. I hereby accept the apper registered agent and agree to act in this capacity. I further agree to comply with the prestatutes relating to the proper and complete performance of my duties, and I am family accept the obligations of my position as registered agent as provided for in Chapter Adducts Adducts Adducts Adducts Figure 10261 SW 20TH ST MIAMI, FL 33165	of the principal office	of the Limited Liability Company is:
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(CONTINUED) SRY PTO	ered agent and agree to act in this capacity. I further ag stess relating to the proper and complete performance of except the obligations of my position as registered agent as Registered Agent's Signature (REQUIF	I hereby accept the appointment as gree to comply with the provisions of all my duties, and I am familiar with and is provided for in Chapter 605, F.S

ARTICLE IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR .	NOEL JOSE BENDANA JR	_
	10261 SW 20TH ST	_
	MIAMI, FL 33165	_
AMBR	JASON BROWN	
	13461 SW 24TH ST	_
	MIAMI, FL 33175	_
AMBR	NOEL BENDANA SR	
AMDK	2610 SW 99TH AVE	
	MIAMI, FL 33165	_
	MIANI, FL 33103	_
		_
		_
(Use attachment if necessary)	TAL	ă
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	ORI R	٦
REQUIRED SIGNATURE: ,	OUIRED SIGNATURE:	
MEXOTAL SIGNATURE I	, A	
MIB	4	
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 ment to the Department of State constitutes a third degree for	
•	CUNANIA TO	
NOU JOSE B	ENDANA JR	

Typed or printed name of signce

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)