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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Okyotato/Elp/1 Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified depies
Special Instructions to Filing Officer:

Office Use Only



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W22-31109

COVER LETTER

TO: New Filing Section Division of Corporations	**
SUBJECT: COVER COLOR PAINTING CORP	
(Name of Resulting	Florida Limited Company)
	Organization, and fees are submitted to convert an "Other y Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this	matter to:
CESAR J QUINTERO	
(Contact Person)	
COVER COLOR PAINTING CORP	
(Firm/Company)	
8811 NW 112 STREET	
(Address)	
HIALEAH GARDENS, FL 33018	
(City, State and Zip Code)	
quintero473@bellsouth.net	
E-mail Address: (to be used for future annual report no	etifications)
For further information concerning this matter, p	lease call:
CESAR J QUINTERO at (786)303 7673
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (A dollars and drawn on a bank located in the Unite	All checks processed by this office must be payable in US d States)
	180.00 Filing Fees Certified Copy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section	Street Address: New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, 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: COVER COLOR PAINTING CORP. (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a COCPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity, the name of the country)
on 10/18/2005 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
COVER COLOR PAINTING LC. (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (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.

.' Signad this	s 27 day of JANUARY	20.22	
eighed mi	S 41 Udy UI VARIONICI		
<u>Signature</u>	of Authorized Representative of Lim	ited Liability Company:	
Signature (of Authorized Representative:	a Churton	
Printed Na	me: CESAR J QUINTERO	Title: PRESIDENT	
	(s) on behalf of Other Business Entity:	[See below for required signature(s) }
Signature:	Que Suite		<u> </u>
Printed Na	me: CESAR J. QUINTERI	Y Title: MGR	X
Signature:			
Printed Na	me:	Title:	
Printed Na	me:	Title:	-
Signature:	me:	Titla	
rimed Na	nie	1 itte	
Signature:			
Printed Na	me:	Title:	
Signature:			
Printed Na	me:	Title:	
If Florida	Corporation:		
	of Chairman, Vice Chairman, Director, or	Officer.	
If Director	s or Officers have not been selected, an Ir	ncorporator must sign.	
If Florida	General Partnership or Limited Liabil	lity Partnership:	
	of one General Partner.		
If Elouida	Limited Partnership or Limited Liabil	ity Limited Dortnership.	
	of ALL General Partners.	ny Lumeu i ai mersing.	
			<u> </u>
All others:	: of an authorized person.		
orginature (n an audiorizou person.		.
Fees:			<u>8</u>
۸	ticles of Conversion:	\$25.00	ALCAHASSIE, 6 686
	es for Florida Articles of Organization:	\$125.00 \$125.00	₽.
	rtified Copy:	\$30.00 (Optional)	3
	rtificate of Status:	\$5.00 (Optional)	

The name of the Limited Liabili	ty Company is:		
COVER COLOR PAINTING LLC			
(Must contain the wo	rds "Limited Liability Con	npany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of the princi	oal office of the Limited	Liability Company is:
Principal Office Address:	<u>M</u>	ailing Address:	
8811 NW 112 STREET	88	11 NW 112 STREET	
HIALEAH GARDENS, FL 33018	н	ALEAH GARDENS, FL 33	3018
ARTICLE III - Registered Ag (The Limited Liability Company cannot se business entity with an active Florida regi The name and the Florida street JOSE MANU	rve as its own Registered a stration.)	Agent. You must designate an in	
	ret address (P.O. Bo		

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	CESAR J QUINTERO		•
	8811 NW 112 STREET		_
	HIALEAH GARDENS, FL 33018		-
AMBR	RITA SANCHEZ QUINTERO		
	8811 NW 112 STREET		-
	HIALEAH GARDENS, FL 33018		-
			-
			-
			-
		<u> </u>	-
			-
(Use attachment if necessary)	<u> </u>	200	
	<u></u>		- ,
FICLE V: Other provisions, if any.		2022 DEC -	
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		<u>-</u>	
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REQUIRED SIGNATURE:	<u> </u>	5 <u> </u>	
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Cenor Chuten			_

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.

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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)