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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
L. SELLERS
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EXAMINER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations			
SUBJECT: A&M COUNTRY EST	ATES	S, LLC	
			nited Company)
			ation, and fees are submitted to convert an empany in accordance with s. 608.439, F.S.
Please return all correspondence concerni	ng this	matter to:	•
RAUL R. DELGADO DE ARMAS			
(Contact Person)			
- RAUL R. DELGADO DE ARMAS & A	SSOC	IATES	
(Firm/Company)			
4000 PONCE DE LEON BLVD, SUIT	E 470		
(Address)	-	-	
CORAL GABLES, FL 33146			
(City, State and Zip Code))		
RDELGADO@RDALAW.CO,			
E-mail address: (to be used for future annual repor	t notific	ations)	
For further information concerning this m	atter, p	lease call:	
RAUL R. DELGADO DE ARMAS	at (_	305	777-0432
(Name of Contact Person)			nd Daytime Telephone Number)
Enclosed is a check for the following amo	unt:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of Status		0.00 Filing Fee. Certified Copy	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registra Division P. O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314

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: A&M COUNTRY ESTATES, CORP	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a CORPORATION.	
(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 SEPTEMBER 16TH, 2002 (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 law which it is now organized, formed or incorporated:	ws of
FLORIDA ES	
4. The name of the Florida Limited Liability Company as set forth in the attached Armeles of Organization:	
A&M COUNTRY ESTATES, LLC (Enter Name of Florida Limited Liability Company)	
(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 filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective date listed attached Articles of Organization, if an effective date is listed therein.)	
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the conversion	ersion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this 11TH day of MARCH	20_11	
	oresentative of Limited Liability Company: ated in this document are true. Any false infored for in s.817.155, F.S.	mation
Signature of Member or Authorized Representation Name: <u>ALEJANDRO VALIENTE</u>	sentative: Title: MANAGER	
Signature(s) on behalf of Other Business I this document are true. Any false informa s.817.155, F.S. See below for required sign	Entity: Individual(s) signing affirm(s) that the stion constitutes a third degree felony as providual(s).]	facts stated in led for in
Simon Valin Valin	te	
	Title: MANAGER	
Signature: X Printed Name: ALEJANDRO VALIENTE	Title: MANAGER	
Signature:		
Printed Name:	Title:	
Signature:	Title:	
Printed Name:	Title:	
Signature:		
	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected.		
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
A&M COUNTRY ESTATES, LLC (Must end with the words "Limited Liability Company, the abbrevia	ation "L.L.C" or the designation "LLC.")	
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Comp	any is:
Principal Office Address:	Mailing Address:	
1131 STILLWATER DRIVE MIAMI BEACH, FL 33141	1131 STILLWATER DRIVE MIAMI BEACH, FL 33141	
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.) The name and the Florida street address of the registered ANA M. CAMACHO	Agent. You must designate an individual or another	÷
N	ame	
141 ALMERIA AVENU Florida street address (P.	· · · · · · · · · · · · · · · · · · ·	
CORAL GABLES, City, Sta	FL 33134 ite, and Zip	
Having been named as registered agent and to accept company at the place designated in this certificate, I agree to act in this capacity. I further agree to comper proper and complete performance of my duties, and position as registered agent as provided for in Thap	hereby accept the appointment as registere ly with the provisions of all statutes relatin I am familiar with and accept the obligatio	ed agent and ng to the
x Out!	Y TAE	== T

(CONTINUED)

Page 1 of 2

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

" ACD! X 4	Name and Address:
"MGR" = Manager	- M2
"MGRM" = Managin	g Member
MGRM	ALEJANDRO VALIENTE
	1131 STILLWATER DRIVE
	MIAMI BEACH, FL 33141
MGRM	MARIA VALIENTE
	1131 STILLWATER DRIVE
	MIAMI BEACH, FL 33141
,	
(Use attachment if nec	ressary)
(Use attachment if nec	cessary)
	• *
ICLE V: Effective dat	e, if other than the date of filing: (OPTIONAL)
ICLE V: Effective dat	e, if other than the date of filing: (OPTIONAL) not be prior to nor more than 90 days after the date this document is file
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ICLE V: Effective date effective date: 1) cann lorida Department of ficate of Conversion, i UIRED SIGNATURE Signature of a 1	e, if other than the date of filing: (OPTIONAL) not be prior to nor more than 90 days after the date this document is file State; AND 2) must be the same as the effective date listed in the attack f an effective date listed therein.) E: Mal-A member or an authorized representative of a member.
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