# 4/200/6/550

,		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	me)
PI	5652	7
	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	<b>A</b> . I	LUNT
	DEC	<b>2 8</b> 2012
	EXAN	MINER 2-52149

Office Use Only.



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 10, 2012

ANGEL FERNANDEZ JR. 3527 NW 49 ST. MIAMI, FL 33142

SUBJECT: 3527 NW 49 ST LLC Ref. Number: W12000052149



We have received your document for 3527 NW 49 ST 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):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return 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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 712A00025125

# **COVER LETTER**

Tallahassee, FL 32301

TO:	Registration Division of C						
SUBJ	ECT: 3527	NW 49 ST LLC			_		
		(Name of	Resulting Florida Limit	ted Company)			
"Othe	r Business En	tity" into a "Florida L	imited Liability Cor	ion, and fees are submitted npany" in accordance with s	to conv s. 608.4	ert an 39, F.S	١.
Please	e return all cor	respondence concerni	ing this matter to:				
ANG	EL FERNAN	NDEZ JR					
		(Contact Person)					
3527	NW 49 ST L	LC			<b>35.</b>	28	
		(Firm/Company)			<u> </u>	2812 DEC 27	_
3235	NW 41 ST					75	•
		(Address)			SS.	27	į
MIAI	MI, FL 3314	42			100	2	1
		(City, State and Zip Code	(2)		70 55 70 55	Ę.	1
		P@GMAIL.COM			1724 774 11414	Ç	
E-mail	address: (to be u	sed for future annual repo	ort notifications)			-	
For fi	urther informa	tion concerning this n	natter, please call:				
ANG	EL FERNAND	EZ, JR	at (_ <b>305</b> )	634-6646			
	(Name of Cor		(Area Code a	nd Daytime Telephone Number)	_		
Enclo	sed is a check	for the following am	ount:				
(\$25 fo & \$12	00 Filing Fees or Conversion 5 for Articles (anization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fee and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status	4F %		
STR	EET ADDRE	SS:	MAILI	NG ADDRESS:			
_	stration Section		_	tion Section			
	ion of Corport on Building	ations	Division P. O. Bo	of Corporations			
	Executive Ce	nter Circle		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 Certif	icate of	
Conversion is:	<u> </u>	2
3527 NW 49 ST CORP		~ □
(Enter Name of Other Business Entity)	监查	2017 DEC
	CO (30)	27
2. The "Other Business Entity" is a CORPORATION	100 m	,
(Enter entity type. Example: corporation, limited partnership,		PIA
general partnership, common law or business trust, etc.)	5.5	ట్ల
	걸음	<b>⊘</b>
first organized, formed or incorporated under the laws of FLORIDA	- 32	(36)
(Enter state, or if a non-U.S. entity, the name of the country)		
on 07/08/2010 .		
	4 10	
(Enter date "Other Business Entity" was first organized, formed or incorp	orated)	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country un which it is now organized, formed or incorporated:	der the l	aws of
which it is now organized, formed of incorporated:		
FLORIDA		
4. The name of the Florida Limited Liability Company as set forth in the attached Artic Organization:	cles of	
3527 NW 49 ST LLC		
(Enter Name of Florida Limited Liability Company)		
5. If not effective on the date of filing, enter the effective date: 10/01/2012		
(The effective date: 1) cannot be prior to nor more than 90 days after the date this filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective attached Articles of Organization, if an effective date is listed therein.)	docume date list	nt is ed in the
6. The conversion is permitted by the applicable law(s) governing the other business enti- conversion complies with such law(s) and the requirements of s 608.439. F.S. in effective		

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

currently organized, formed or incorporated.

\$5.00 (Optional)
Page 2 of 2

Certificate of Status:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

3527 NW 49 ST LLC (Must end with the words "Limited Liability Company, the abb	breviation "L.L.C.," or the designation "LLC.")	
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
3235 NW 41 ST	3235 NW 41 ST	
MIAMI, FL 33142	MIAMI, FL 33142	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the	registered agent are:	ere e
ANGEL FERNANDI	EZ JR	1
	Name Sp	[_
3235 NW 41 ST Florida street address	s (P.O. Box NOT acceptable)	
MIAMI	FI 33142	

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, E.S..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	Title:	Name and Address:	
ANGEL FERNANDEZ, JR  3235 NW 41 ST  MIAMI, FL 33142  (Use attachment if necessary)  CTICLE V: Effective date, if other than the date of filing: 10/01/2012  (OPTIONAL)  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 as the effective date listed in the attached reficiate of Conversion, if an effective date listed therein.)	•	1	
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OUIRED SIGNATURE:			date listed in the attached
	tificate of Conversion, if a	effective date listed therein.)	
	OUIRED SIGNATURE:		
Signature of a member or an authorized representative of a member.			
Signature of a member or an authorized representative of a member.	1//		
Signature of a member or an authorized representative of a member.			
	Signature of a me	ber or an authorized representative of a member.	
	the penalties of perjury that the	e facts stated herein are true. I am aware that any false in	itormation submitted in a

ANGEL FERNANDEZ, JR

Typed or printed name of signee