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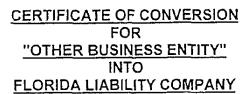
1000 Ponce de Leon Blvd. Suite: 105 Coral Gables, FL 33134 Phone: 305-444-4994 Email: filing@ecfsfiling.com

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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

(CORPORATE NAME)	a Management Compa	DOCUMENT #)
2. (CORPORATE NAME)	(DOCUMENT #)
3. (CORPORATE NAME)	(DOCUMENT #)
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Examiners Initials





This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida 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: CATALONIA MANAGEMENT COMPANY. **P0800014374
- 2. The "Other Business Entity" is a corporation, first organized, formed or incorporated under the laws of Florida on February 7, 2008.
- 3. If the jurisdiction of the "Other Business Entity" was changed, the state or county under the laws of which it is now organized, formed or incorporated: N/A
- 4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: CATALONIA MANAGEMENT, LLC.
- 5. 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.
- 6. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

Signed this	<u> 9 </u>	day of	January	2012. 2013

Signature of Member or Authorized Representative of Limited Liability Company: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in
s.817.155, F.S.
Signature of Member or Authorized Representative:
Printed Name: MARIA ANGIRLES NAPOI THE MEMBER-Manager
Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree
felony as provided for in s.817.155, F.S.
Signature of Member or Authorized Representative:
Printed Name: MARIANA VOJI ACHIZ Title President

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

NAME

The name of the Limited Liability Company is:

CATALONIA MANAGEMENT, LLC.

ARTICLE II

The mailing address and street address of the principal office of the Limited Liability Company is: 250 Catalonia Avenue, Suite 801, Coral Gables, Florida, 33134.

<u>ARTICLE III</u>

Registered Agent, Registered Office, and Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

NAME:

KAREN CRUZ

ADDRESS:

250 Catalonia Avenue, Suite 801

Coral Gables, Florida 33134

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. FS.

KAREN CRUZ Registered Agent

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ARTICLE IV - Management

__X____ The Limited Liability Company is to be managed by one or more member-managers and is, therefore, a member-manager managed company.

MARKA OF MARGELES NARDI

MARIA DOLORES NARDI

MEMBER-MANAGER

MARIA JOSÉ NARDI MEMBER-MANAGER

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true).