# 13000087611

(Re	questor's Name)	
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JUN 17 2013 J. BRYAN

#### **COVER LETTER**

TO: Res

Registration Section

**Division of Corporations** 

SUBJECT: PRO CLEANING LADIES LLC

Tallahassee, FL 32301

(Name of Resulting Florida Limited Company)

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

G. DEL VALLE	
(Contact Person	1)
MBA GROUP PROFESSIONAL	L LLC 💆
(Firm/Compan	L LLC
9951 ATLANTIC BLVD STE 236	
(Address)	
JACKSONVILLE FL 3222	5
(City, State and Zip	Code)
MBAGLADYS@ATT.NET	
E-mail address: (to be used for future annua	al report notifications)
For further information concerning	his matter, please call:
G. DEL VALLE	at ( 904 ) 805-9790
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the followin	g amount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314

## Certificate of Conversion For "Other Business Entity"

### "Other Business Entity"

Into

#### Florida Limited Liability Company



This Certificate 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.608.439, Florida Statutes.

s.608.439, Florida Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of
Conversion is:  PRO CLEANING LADIES INC # \$\rmathcal{P}\$130000 22279.
PRO CLEANING LADIES INC  (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 MARCH 8, 2013 (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 laws of which it is now organized, formed or incorporated:
FLORIDA .
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PRO CLEANING LADIES LLC
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: 06/07/2013  (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 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.
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 <u>06</u> day of <u>JUNE</u>	20 <u>13</u> .	
Signature of Member or Authorized Repulational Signing affirms that the facts statement of the statement of	ted in this document are true. Any fa d for in s.817.155, F.S.	lse information
Signature of Member or Authorized Represe Printed Name: MARISOL NUNEZ	entative: MARISOL NUNEZ Title: DIRECTOR	rishung
Signature(s) on behalf of Other Business Enthis document are true. Any false information s.817.155, F.S. [See below for required signs of the control of the	ntity: Individual(s) signing affirm(s) to constitutes a third degree felony a ature(s).]	hat the facts stated in s provided for in
Signature: Tomasa Congoria To Printed Name: TOMASA LONGORIA-TORRES	wes	
Printed Name: TOMASA LONGORIA-TORRES	Title: DIRECTOR	<u> </u>
Signature: Villa Terreta S	ateur	
Signature: VIIII Terreta S. Printed Name: HILDA TOVERA-GARCIA	Title: DIRECTOR	FILE 2013 JUN 17 SECRETAR TRALLAHASS
		CRE L
Signature: Printed Name:	Title:	15 T
		m - 111
Signature:Printed Name:	Title	
Printed Name:	Title.	
Signature:		
Signature:Printed Name:	Title:	<sup>2</sup>
Siametona.		
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Directly Directors or Officers have not been selected.  If Florida General Partnership or Limited.	, an Incorporator must sign.	
Signature of one General Partner.	<u>Siasinty Langueron pr</u>	
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:	
PRO CLEANING LADIES LLC (Must end with the words "Limited Liability Company, the abbrevia	tion "L.L.C.," or the designation "LLC.")
ARTICLE II - Address: The mailing address and street address of the princi	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
441 BRODY COVE TR	
JACKSONVILLE FL 32225	
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	Agent. You must designate an individual or another
The name and the Florida street address of the regis	stered agent are:  TALLAHASS  ame
MARIZOL NUNEZ	
Na	ame SSET
441 BRODY COVE TR	
Florida street address (P.	O. Box NOT acceptable)
JACKSONVILLE	FL 32225
City, Sta	ite, and Zip

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, F.S..

Mainel Muse
Registered Agent's Signature (REQUIRED)

(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:

Title:	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Mer	nber	
MGR	MARIZOL NUNEZ	
<del></del>	441 BRODY COVE TR	_
	JACKSONVILLE FL 32225	<del></del>
	0.00.00.00.00.00.00.00.00.00.00.00.00.0	<del></del>
MGR	HILDA RIVERA-GARCIA	
	11990 BEACH BLVD AP 115	<del></del>
	JACKSONVILLE FL 32246	_
		_
MGR	TOMASA LONGORIA-TORRES	FORETARY SECRETARY
	7500 POWERS AVEA APT 124	
	JACKSONVILLE FL 32217	器 皇 二
		SEA -
		NIT PH ETARY OF BASSEF!
		To I
		SEF. FLORNING SEF. FLORNING
(Use attachment if necessar	y)	DE NO
ARTICLE V: Effective date, if o	ther than the date of filing:	
	(OPTIONAL)	
	prior to nor more than 90 days after the date this docu	
	; AND 2) must be the same as the effective date listed	in the attached
Certificate of Conversion, if an e	ffective date listed therein.)	
DEOLUDED OLON ETUDE		
REQUIRED SIGNATURE:		
	_	
M. Dire	1 22 11 21	
Signature of a mamb	er or an authorized representative of a member.	
the penalties of perjury that the f	108(3), Florida Statutes, the execution of this document constitutes a acts stated herein are true. I am aware that any false information substate constitutes a third degree felony as provided for in s.817.155, F	mitted in a
MARIZOL NUN	IE7	
IVIANIZOL NON	Typed or printed name of signee	
	Typed of printed hume of signee	
	D 4 04	